

Case Healthy House and Patient Project – Home Hazards Visual Assessment – Geriatric-specific items in red [1/16/07]

Project # _____ Date _____ Visit # _____			
Home Environment Specialist _____			
Medical Resident _____	Home Phone _____	Work Phone _____	
	Cell Phone _____	Pager # _____	
Patient _____	Home Phone _____	Work Phone _____	
Address _____	Cell Phone _____	Pager # _____	
City _____ Zip Code _____	Statement of scope and limitations signed and attached? <input type="checkbox"/> Yes <input type="checkbox"/> No		

EXTERIOR		EHW, Family, Owner, CHN, PHPP, Lead Prg	
E-1 Estimated age of house	Pre-1950: high lead risk from paint; 1950s to late 1970s: some lead risk	<input type="checkbox"/> Pre-1950s <input type="checkbox"/> 1950s – 1978 <input type="checkbox"/> Post 1978	
E-2 Is the home a single, up and down, side by side, triple, 4-suite, 5 or more?		<input type="checkbox"/> Single <input type="checkbox"/> Up & down <input type="checkbox"/> Side-by-side <input type="checkbox"/> Triple <input type="checkbox"/> 4-suite <input type="checkbox"/> 5 or more	
E-3 Is the home wood frame or brick/stucco?		<input type="checkbox"/> Wood frame <input type="checkbox"/> Brick/stucco	
E-4 Deteriorated exterior paint? (if children come into home)	Lead contamination of soil; lead dust blown and tracked in	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Siding ( <input type="checkbox"/> <10ft <sup>2</sup> <input type="checkbox"/> >10ft <sup>2</sup> ) <input type="checkbox"/> Porch ( <input type="checkbox"/> <10ft <sup>2</sup> <input type="checkbox"/> >10ft <sup>2</sup> ) <input type="checkbox"/> Garage ( <input type="checkbox"/> <10ft <sup>2</sup> <input type="checkbox"/> >10ft <sup>2</sup> ) <input type="checkbox"/> Trim ( <input type="checkbox"/> <10% <input type="checkbox"/> >10%) <input type="checkbox"/> Foundation ( <input type="checkbox"/> <10ft <sup>2</sup> <input type="checkbox"/> >10ft <sup>2</sup> )	<input type="checkbox"/> Referral to lead hazard control program L
E-5 Bare soil. Any at play area or greater than 9 sq. ft. elsewhere? (if children come into home)	Lead-contaminated soil	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Foundation <input type="checkbox"/> Play area <input type="checkbox"/> Garden <input type="checkbox"/> Tree lawn <input type="checkbox"/> Front yard <input type="checkbox"/> Near driveway <input type="checkbox"/> Side yard <input type="checkbox"/> Back yard	<input type="checkbox"/> Cover with mulch — <input type="checkbox"/> Fill with gravel — <input type="checkbox"/> Seed and water —
E-6 Trash in closed containers?	Food source for rodents	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide new container — <input type="checkbox"/> Agree to keep closed F
E-7 Piles of rubbish or debris?	Harborage for rodents	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Remove debris —

Home Health & Safety Hazards Review – Environmental Health Watch

Project #	Address	Date	Inspector
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EXTERIOR		EHW, Family, Owner, CHN, PHPP, Lead Prg	
E-8 Gutters or downspouts damaged?	Rain water intrusion leads to mold and paint failure	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Referral C
E-9 Yard, walks, drive slope toward house foundation?	Rain water intrusion leads to mold and paint failure	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Referral C
E-10 Is there pressure-treated lumber used for porch railings, decks, fences, play equipment? (if children come into home)	Potential arsenic exposure	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Front porch <input type="checkbox"/> Back porch <input type="checkbox"/> Side porch <input type="checkbox"/> Play structure <input type="checkbox"/> Other	<input type="checkbox"/> Agree to wash child's hands after contact F
E-11 Is there a washable rug at main entrance to wipe-off shoes?	Tracked-in contaminants, e.g., lead, pesticides, petrochemicals	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide mats and sign E <input type="checkbox"/> Wash mat F
E-12 Are shoes taken off upon entry?	Tracked-in contaminants, e.g., lead, pesticides, petrochemicals	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide shoes off sign E <input type="checkbox"/> Provide bench — <input type="checkbox"/> Provide tray for shoes — <input type="checkbox"/> Agree to take off shoes F
E-13 Is the porch/exit light working?	Fall, Crime	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Doesn't have one	<input type="checkbox"/> Replace bulb E <input type="checkbox"/> Install light C
E-14 Steps in poor condition?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Repair C
E-15 Hand rails on stairs?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Install handrails C
E-16 In need of ramp?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Refer to WRAAA
E-16 Exterior Memo			

BASEMENT		EHW, Family, Owner, CHN, PHPP, Lead Prg	
BS-1 Musty odor?	Mold/moisture	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> CHN referral C
BS-2 Natural gas odor?	Flammables	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Call gas company immediately 877-542-2630

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<b>BASEMENT</b>			
BS-3 Petroleum products odor?	Flammables	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Investigate source E <input type="checkbox"/> Remove source
BS-4 Other chemical odor?	Toxics	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Investigate source E <input type="checkbox"/> Remove source
BS-5 Walls or floors damp?	Mold/moisture	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> CHN referral C
BS-6 Standing water?	Mold/moisture	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> CHN referral C
BS-7 Crawl spaces with dirt floors?	Mold/moisture	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> CHN referral C
BS-8 Clothes dryer vented to outside property?	Mold/moisture	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Vent to exterior —
BS-9 Clutter and debris – clothes, boxes, paper, etc.?	Mold host material Harborage for pests Impediment to cleaning and pest inspection	<input type="checkbox"/> yes <input type="checkbox"/> no MOLD HOST: <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide shelves — <input type="checkbox"/> Agree to use shelves F
BS-10 Plumbing leaks (not into drain)?	Moisture/mold	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Supply line ( <input type="checkbox"/> major <input type="checkbox"/> minor) <input type="checkbox"/> Waste line ( <input type="checkbox"/> major <input type="checkbox"/> minor)	<input type="checkbox"/> Notify landlord E <input type="checkbox"/> CHN referral C
BS-11 Floor covered? Indicate rug, resilient tile, cardboard, etc.	Moisture/mold	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Rug <input type="checkbox"/> Resilient tile <input type="checkbox"/> Plywood <input type="checkbox"/> Cardboard	<input type="checkbox"/> Remove floor covering —
BS-12 Evidence of flooding?	Mold/moisture, bacteria	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Clothes <input type="checkbox"/> Upholster'd furniture <input type="checkbox"/> Cardboard <input type="checkbox"/> Drywall/paneling <input type="checkbox"/> Rug <input type="checkbox"/> Other porous debris OCCURS WHEN: <input type="checkbox"/> Raining <input type="checkbox"/> Washing clothes LAST TIME: <input type="checkbox"/> In past 6 months <input type="checkbox"/> Greater than 6 months	<input type="checkbox"/> Investigate for mold and moisture E
BS-13 Visible mold?	Mold exposure	<input type="checkbox"/> yes <input type="checkbox"/> no (complete mold assessment form)	<input type="checkbox"/> Moisture source investigation E <input type="checkbox"/> PHPP referral P <input type="checkbox"/> CHN referral C

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Home Health & Safety Hazards Review – Environmental Health Watch

Project #	Address	Date	Inspector
<b>BASEMENT</b>			
BS-16 Basement used as sleeping room	Increased risk for radon, mold, allergen and combustion products exposure	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide radon test E
BS-17 Are boiler, heating pipes or ducts covered with suspected asbestos? What is the condition?	Potential asbestos exposure	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Intact <input type="checkbox"/> Some damage <input type="checkbox"/> Much damage	<input type="checkbox"/> Provide asbestos exposure reduction information E
BS-18 Do flues and chimney appear intact?	Combustion products – gases, particulates, moisture	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Notify landlord E <input type="checkbox"/> CHN referral C <input type="checkbox"/> Gas company inspection 877-542-2630
BS-19 Are hazardous materials stored in the basement?	Fire, explosion, VOCs, poisoning	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Propane tanks <input type="checkbox"/> Gasoline <input type="checkbox"/> Other	<input type="checkbox"/> Info on HHW drop-off E <input type="checkbox"/> Remove and take to HHW drop-off —
BS-20 Deteriorated paint on wood or floors? (if children come into home)	Possible lead exposure	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Doors ( <input type="checkbox"/> <2ft <sup>2</sup> <input type="checkbox"/> >2ft <sup>2</sup> ) <input type="checkbox"/> Windows ( <input type="checkbox"/> <10% <input type="checkbox"/> >10%) <input type="checkbox"/> Trim ( <input type="checkbox"/> <10% <input type="checkbox"/> >10%) <input type="checkbox"/> Floor ( <input type="checkbox"/> <2ft <sup>2</sup> <input type="checkbox"/> >2ft <sup>2</sup> ) <input type="checkbox"/> Shelving ( <input type="checkbox"/> <10% <input type="checkbox"/> >10%) <input type="checkbox"/> Wall ( <input type="checkbox"/> <2ft <sup>2</sup> <input type="checkbox"/> >2ft <sup>2</sup> )	<input type="checkbox"/> Referral to lead hazard control program L
BS-21 Is there a Cleveland Drop?	Increased exposure to mold and allergen in living areas	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> CHN referral C
BS-22 Basement Memo			
<b>KITCHEN</b>			
K-1 Trash containers covered? Clean?	Food source for pests	COVERED: <input type="checkbox"/> yes <input type="checkbox"/> no CLEAN: <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide closeable container & bags and info on roach control E <input type="checkbox"/> Agree to keep closed F
K-2 Plumbing leak (not into drain)?	Mold/moisture	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Supply line ( <input type="checkbox"/> major <input type="checkbox"/> minor) <input type="checkbox"/> Waste line ( <input type="checkbox"/> major <input type="checkbox"/> minor)	<input type="checkbox"/> Notify landlord E <input type="checkbox"/> CHN referral C

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Project #	Address	Date	Inspector
<b>KITCHEN</b>			
K-3 Is floor carpeted? What is the condition?	Mold/moisture Reservoir for allergens and other contaminants	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Cleanable <input type="checkbox"/> Not cleanable	EHW, Family, Owner, CHN, PHPP, Lead Prg <input type="checkbox"/> Remove —
K-4 Is stove vented to the exterior?	Reduces moisture and exposure to combustion products	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Notify landlord E
K-5 Is stove used for room heating?	Combustion product exposure	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Family agrees to stop F <input type="checkbox"/> Provide space heater E <input type="checkbox"/> Insulate —
K-6 Do cabinets have child-proof locks? (if children come into home)	Poisoning from pesticides, cleaning chemicals, etc.	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide and install E
K-7 Is there a fire extinguisher?	Fire safety	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide and install E
K-8 Is the tap water > 120F?	Scalding hazard	<input type="checkbox"/> more than 120 <input type="checkbox"/> less than 120	<input type="checkbox"/> Adjust temperature —
K-9 Is fridge < 45 F?	Food spoilage	<input type="checkbox"/> more than 45 <input type="checkbox"/> less than 45	<input type="checkbox"/> Adjust temperature —
K-10 Natural gas odor?	Asphyxiation	<input type="checkbox"/> yes <input type="checkbox"/> no PILOTS ALL LIT: <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Call gas company immediately 877-642-2630 —
K-11 Are frequently used items easily accessible?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Place commonly used items in easy to reach areas. E
K-12 Kitchen Memo			
<b>BATHROOM</b>			
BT-1 Plumbing leak (not into drain)?	Mold/moisture	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Notify landlord E <input type="checkbox"/> CHN referral C
BT-2 Is floor carpeted? What is the condition?	Mold/moisture Reservoir for contaminants	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Cleanable <input type="checkbox"/> Not cleanable	<input type="checkbox"/> Remove —
BT-3 Is there an exhaust fan?	Moisture/mold	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Info on use of fan, prompt E
BT-4 Vented to the outside?	Moisture/mold	<input type="checkbox"/> yes <input type="checkbox"/> no	

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Project #	Address	Date	Inspector
<b>BATHROOM</b>			
BT-5 Mercury thermometer?	Breakage > mercury exposure	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Replace with digital E
BT-6 Poorly caulked tub/wall/floor joins?	Mold/moisture	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Recaulk E
BT-7 Problem getting on/off toilet?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Install grab bars E
BT-9 Slippery floors?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Put non-skid mats or strips on all surfaces that may get wet. E
BT-10 Trouble getting through doorway?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Remove door and use curtain E
BT-11 Is there a nightlight?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Give/Install nightlight E
BT-11 Bathroom Memo			

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Home Health & Safety Hazards Review – Environmental Health Watch

Project #	Address	Date	Inspector
<b>BEDROOM</b>			
B-1 Is bed on wheels?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Remove wheels E
B-2 Is there a nightlight?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Give/Install nightlight E
B-3 Is there a light switch close to the bed?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Install light switch or light CHN <input type="checkbox"/> Provide touchlamp E
B-4 Is the pathway from bedroom to bathroom kept clear?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Remove clutter, provide storage units, shelves E
B-4 Are there sliding rugs?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Remove E <input type="checkbox"/> Put grip tape on rugs E <input type="checkbox"/> Put rubber backing on rugs E
B-5 Is there an easily accessible phone for night calls?	Fall, Emergency	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Bedside Phone E <input type="checkbox"/> Cordless Phone E <input type="checkbox"/> Tell about lifeline option E
<b>CHILD'S SLEEPING AREA (If child comes into home)</b>			
BR-1 Does child have crib?	SIDS	<input type="checkbox"/> yes <input type="checkbox"/> no	
BR-2 Are crib slats less than 2 3/8 "?	Injury hazard	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Look for a safer crib (ask family or others)
BR-3 Fitted crib mattress cover? Smothering hazards? Firm, tight-fitting mattress?	SIDS	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Remove smother hazards F
BR-4 Bedroom Memo			
<b>ALL AREAS</b>			
A-1 Is there a functioning smoke detector on every floor of the house?	Fire safety	<input type="checkbox"/> yes <input type="checkbox"/> no WHERE NEEDED: <input type="checkbox"/> Basement <input type="checkbox"/> 1 <sup>st</sup> floor <input type="checkbox"/> 2 <sup>nd</sup> floor <input type="checkbox"/> 3 <sup>rd</sup> floor	<input type="checkbox"/> Provide and install E

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Home Health & Safety Hazards Review – Environmental Health Watch

Project #	Address	Date	Inspector
<b>ALL AREAS</b>			
A-2 Is there a carbon monoxide detector by sleeping areas?	Carbon monoxide	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide and install E
A-3 Is there evidence of smoking in the house?	Multiple air contaminants	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Smoke-free home pledge F
A-4 Is there evidence of pets with fur or feathers?	Allergen source	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> If asthma or allergies, give exposure reduction info E
A-5 Is an unvented (non-electric) space heater used?	Produce hazardous gases and particulates and moisture	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide space heater E
A-6 Are floor surfaces smooth and cleanable?	Broken and pitted flooring impedes cleaning of food debris and contaminants	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Kitchen <input type="checkbox"/> Bathroom <input type="checkbox"/> Bedroom <input type="checkbox"/> Living room <input type="checkbox"/> Dining room <input type="checkbox"/> Halls	<input type="checkbox"/> Floor repair —
A-7 Food debris on floors?	Food source for pests	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Info on IPM E
A-8 Is paint on walls, trim, windows deteriorated? (if children come into home)	Lead hazard	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Doors ( <input type="checkbox"/> <2ft <sup>2</sup> <input type="checkbox"/> >2ft <sup>2</sup> ) <input type="checkbox"/> Windows ( <input type="checkbox"/> <10% <input type="checkbox"/> >10%) <input type="checkbox"/> Trim ( <input type="checkbox"/> <10% <input type="checkbox"/> >10%) <input type="checkbox"/> Floor ( <input type="checkbox"/> <2ft <sup>2</sup> <input type="checkbox"/> >2ft <sup>2</sup> ) <input type="checkbox"/> Wall ( <input type="checkbox"/> <2ft <sup>2</sup> <input type="checkbox"/> >2ft <sup>2</sup> )	<input type="checkbox"/> Referral to lead hazard control program L
A-9 Are there window screens on all windows and are they in good repair?	Mosquito-borne illnesses	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Notify landlord E
A-10 Visible mold?	Mold exposure	<input type="checkbox"/> yes <input type="checkbox"/> no (complete mold assessment form)	<input type="checkbox"/> PHPP referral P <input type="checkbox"/> CHN referral C <input type="checkbox"/> Moisture source investigation E
A-11 Clutter that impedes effective cleaning?	Food source for pests Harborage for pests	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> some <input type="checkbox"/> much	<input type="checkbox"/> Provide shelves/storage containers — <input type="checkbox"/> Agree to use containers F
A-12 Heavy dirt and dust on floors	Reservoir of allergens and other contaminants	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> some <input type="checkbox"/> much	<input type="checkbox"/> Provide cleaning kit E

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Home Health & Safety Hazards Review – Environmental Health Watch

Project #	Address	Date	Inspector
<b>ALL AREAS</b>			
A-13 Evidence of rodents – stains, gnaw marks, droppings, traps.	Rodent infestation	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Kitchen <input type="checkbox"/> Bathroom <input type="checkbox"/> Bedroom <input type="checkbox"/> Living room <input type="checkbox"/> Dining room <input type="checkbox"/> Halls <input type="checkbox"/> Basement	<input type="checkbox"/> Set traps —
A-14 Evidence of cockroaches – live or dead roaches, droppings, control products	Cockroach infestation	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Kitchen <input type="checkbox"/> Bathroom <input type="checkbox"/> Bedroom <input type="checkbox"/> Living room <input type="checkbox"/> Dining room <input type="checkbox"/> Halls <input type="checkbox"/> Basement	<input type="checkbox"/> Flush/vacuum/bait E <input type="checkbox"/> IPM supplies and info E
A-15 Evidence of broadcast pesticide application – containers of sprays, foggers, bombs?	Pesticide exposure – airborne and surface residue	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> IPM supplies and info E
A-16 Window guards or other barriers at upper floor windows accessible to children? (if children come into home)	Fall protection; guards must be openable in case of fire	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide and install E <input type="checkbox"/> Move furniture away from windows —
A-17 Long cords on window blinds and shades? (if children come into home)	Strangulation hazard	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Tie up E
A-18 Large buckets with liquid accessible to child? (if children come into home)	Drowning hazards	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide info E
A-19 Hand rails on stairs?	Fall safety	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Repair E
A-20 Gate at top of stairs (if children come into home)	Fall safety	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide and install E
A-21 Loose rugs on stairs?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Remove E <input type="checkbox"/> Nail down to wooden steps E

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Home Health & Safety Hazards Review – Environmental Health Watch

Project #	Address	Date	Inspector
<b>ALL AREAS</b>			
A-22 Difficulty seeing stairs?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Ensure adequate lighting E <input type="checkbox"/> Mark edge of steps with bright colored tape E
A-23 Steps in poor condition?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Repair E?
A-24 Electrical outlet guards (if children come into home)	Electric shock	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide and install E
A-25 Allergen-proof bedding for children and adults with asthma?	Allergen exposure	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide mattress and pillow covers E
A-26 Are all areas of home adequately lit?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Install new lighting CHN <input type="checkbox"/> Provide lamps E <input type="checkbox"/> Provide nightlights E
A-27 Are light switches placed to allow illumination prior to entry into a room?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Install new light switches CHN <input type="checkbox"/> Provide nightlights E
A-28 Are there frayed electrical cords?	Fire	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Remove frayed cords E <input type="checkbox"/> Provide new cords E
A-29 Are outlets overloaded?	Fire	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Provide extension cords E
A-30 Are extension cords under rugs?	Fire, Falls	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Move to perimeter E
A-31 All exits, hallways, and pathways are kept clear?	Fall	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Help clear E <input type="checkbox"/> Advise E
<b>A-32 All Areas Memo</b>			
<b>SECURITY</b>			
S-1 Are door locks present?	Crime	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Install door locks E
S-2 Are window locks present?	Crime	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Install window locks E
S-3 Can alarms be heard?	Crime, Fire	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Refer to resource for alarms for hearing

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Project #	Address	Date	Inspector
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S-4 Security Memo			impaired	E
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[illegible]

## Case Healthy Homes & Patients Project

Case Healthy Homes & Patients Project		
	Pediatric	Geriatric
<b>Moisture Control</b>		
vent clothes dryer directly to exterior		
seal tub/wall surround joint and floor seam		
if drain tile not functioning, disconnect downspout from storm drain (with owner approval)		
other		
<b>Dust Decontamination and Dust Sink Removal</b>		
remove bath, kitchen and basement carpeting		
HEPA vac/intensive clean horizontal surfaces		
cleanup roach contamination on hard surfaces		
remove potential water-damaged material from basement and other areas		
other		
<b>Integrated Pest Management</b>		
flush/vac/bait		
apply gel bait and or borates		
deploy bait stations		
caulk/cover/stuff entry points		
other		
<b>Injury Prevention</b>		
remove mercury thermometer for proper disposal (provide digital thermometer)		
install kitchen fire extinguisher		
install smoke detector		
install CO detector		
install window slam preventer and or opening limiter		
install nightlights		
install touch lamps		
adjust hot water thermostat setting		
remove rugs if possible		
attach gripper tape or rubber backing to rugs		
movement of storage, shelving to level accessible without stepstool		
diminish clutter by offering storage units, shelves		
affix yellow tape on stairs, etc.		

## **APPENDIX 1- OPTIONAL MATERIALS**

	<b><u># of pages</u></b>
<b>Project Management Plan</b>	<b>2</b>
<b>Elevated Blood Leads in Children: 2006 Data</b>	<b>1</b>
<b>Major Cities Comparison of Lead Poisoning</b>	<b>1</b>
<b>Recruitment Brochures:</b>	
<b>Infant Families</b>	<b>2</b>
<b>Geriatric Program</b>	<b>2</b>
<b>CHHAP Program Overview slides</b>	<b>2</b>
<b>Head of Household Agreement Form</b>	<b>1</b>
<b>Visual Assessment Tool (infant and elderly homes)</b>	<b>6</b>
<b>Low Level Interventions</b>	<b>1</b>
<b>Health Event Tracking Form</b>	<b>1</b>
<b>Medical Resident Program Evaluation Form</b>	<b><u>1</u></b>
	<b>20</b>



**Healthy Homes and  
Lead Hazard Programs**

**U.S. Department of Housing  
and Urban Development  
Office of Lead Hazard Control**

OMB Approval No. 2539-0015  
(expires 11/30/2008)

**Factor 4**

**Leveraging Resources**

Name Of The Organization Or Entity That Will Contribute Match Or Leveraged Funds And If The Organization Will Be a Subgrantee/Subrecipient	Work To Be Accomplished In Support Of The Program.	Value Of In-Kind Or Cash Match Contribution*	Additional Leveraged Funds Contribution	Total Of Match And Leveraged Contributions
Name: Case Western Reserve University Type of Organization: private univ, medical school Subgrantee/Subrecipient: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Overall program including clinic patients			
Name: UHMC Dahms Clinical Reserach Unit Type of Organization: priv univ/hospital; NIH res center Subgrantee/Subrecipient: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	-maintain central database system			
Name: Community Housing Solutions Type of Organization: non-profit housing Subgrantee/Subrecipient: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	-housing interventions			
Name: Cleveland Department of Public Health Type of Organization: city health dept Subgrantee/Subrecipient: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	-housing interventions-lead remediation			
Name: Cuyahoga County Board of Health Type of Organization: county health dept Subgrantee/Subrecipient: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	-housing interventions-lead remediation			
Name: Environmental Health Watch Type of Organization: community, environmental Subgrantee/Subrecipient: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	-housing assessments & interventions; education			
Name: Type of Organization: Subgrantee/Subrecipient: <input type="checkbox"/> Yes <input type="checkbox"/> No				\$0.00
Name: Type of Organization: Subgrantee/Subrecipient: <input type="checkbox"/> Yes <input type="checkbox"/> No				\$0.00
Name: Type of Organization: Subgrantee/Subrecipient: <input type="checkbox"/> Yes <input type="checkbox"/> No				\$0.00
<b>Total Amount</b>		<b>\$</b>	<b>\$</b>	<b>\$</b>

**Name of the organization or entity that will contribute match or leveraged funds and if they are to be a subgrantee/subrecipient:** Self explanatory.

**Work to be accomplished in support of the program:** The type of activities that will be accomplished in support of the program (i.e. outreach, training, risk Assessments/paint Inspections, relocation, etc.)

**Value of In-kind or Cash Match Contribution:** As required by statute or appropriation.

**Additional Leveraged Funds Contribution:** Additional funds above the match contribution required by statute or appropriation

**Total of Match and Leveraged Contributions:** The total of an applicant's In-kind or Cash Match Contribution and any additional Leveraged Funds Contribution



<b>America's Affordable Communities Initiative</b>	<b>U.S. Department of Housing and Urban Development</b>	OMB approval no. 2510-0013 (exp. 01/01/2006)
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Public reporting burden for this collection of information is estimated to average 3 hours. This includes the time for collecting, reviewing, and reporting the data. The information will be used for encourage applicants to pursue and promote efforts to remove regulatory barriers to affordable housing. Response to this request for information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

## Questionnaire for HUD's Initiative on Removal of Regulatory Barriers

### Part A. Local Jurisdictions. Counties Exercising Land Use and Building Regulatory Authority and Other Applicants Applying for Projects Located in such Jurisdictions or Counties [Collectively, Jurisdiction]

	1	2
1. Does your jurisdiction's comprehensive plan (or in the case of a tribe or TDHE, a local Indian Housing Plan) include a "housing element? A local comprehensive plan means the adopted official statement of a legislative body of a local government that sets forth (in words, maps, illustrations, and/or tables) goals, policies, and guidelines intended to direct the present and future physical, social, and economic development that occurs within its planning jurisdiction and that includes a unified physical plan for the public development of land and water. If your jurisdiction does not have a local comprehensive plan with a "housing element," please enter no. If no, skip to question # 4.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
2. If your jurisdiction has a comprehensive plan with a housing element, does the plan provide estimates of current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate and middle income families, for at least the next five years?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
3. Does your zoning ordinance and map, development and subdivision regulations or other land use controls conform to the jurisdiction's comprehensive plan regarding housing needs by providing: a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped "as of right" in these categories, that can permit the building of affordable housing addressing the needs identified in the plan? (For purposes of this notice, "as-of-right," as applied to zoning, means uses and development standards that are determined in advance and specifically authorized by the zoning ordinance. The ordinance is largely self-enforcing because little or no discretion occurs in its administration.). If the jurisdiction has chosen not to have either zoning, or other development controls that have varying standards based upon districts or zones, the applicant may also enter yes.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
4. Does your jurisdiction's zoning ordinance set minimum building size requirements that exceed the local housing or health code or is otherwise not based upon explicit health standards?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

<p>5. If your jurisdiction has development impact fees, are the fees specified and calculated under local or state statutory criteria? If no, skip to question #7. Alternatively, if your jurisdiction does not have impact fees, you may enter yes.</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>6. If yes to question #5, does the statute provide criteria that sets standards for the allowable type of capital investments that have a direct relationship between the fee and the development (nexus), and a method for fee calculation?</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>7. If your jurisdiction has impact or other significant fees, does the jurisdiction provide waivers of these fees for affordable housing?</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>8. Has your jurisdiction adopted specific building code language regarding housing rehabilitation that encourages such rehabilitation through graduated regulatory requirements applicable as different levels of work are performed in existing buildings? Such code language increases regulatory requirements (the additional improvements required as a matter of regulatory policy) in proportion to the extent of rehabilitation that an owner/developer chooses to do on a voluntary basis. For further information see HUD publication: "<i>Smart Codes in Your Community: A Guide to Building Rehabilitation Codes</i>" (<a href="http://www.huduser.org/publications/destech/smartcodes.html">www.huduser.org/publications/destech/smartcodes.html</a>)</p>	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
<p>9. Does your jurisdiction use a recent version (i.e. published within the last 5 years or, if no recent version has been published, the last version published) of one of the nationally recognized model building codes (i.e. the International Code Council (ICC), the Building Officials and Code Administrators International (BOCA), the Southern Building Code Congress International (SBCI), the International Conference of Building Officials (ICBO), the National Fire Protection Association (NFPA)) without significant technical amendment or modification. In the case of a tribe or TDHE, has a recent version of one of the model building codes as described above been adopted or, alternatively, has the tribe or TDHE adopted a building code that is substantially equivalent to one or more of the recognized model building codes?</p> <p>Alternatively, if a significant technical amendment has been made to the above model codes, can the jurisdiction supply supporting data that the amendments do not negatively impact affordability.</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>10. Does your jurisdiction's zoning ordinance or land use regulations permit manufactured (HUD-Code) housing "as of right" in all residential districts and zoning classifications in which similar site-built housing is permitted, subject to design, density, building size, foundation requirements, and other similar requirements applicable to other housing that will be deemed realty, irrespective of the method of production?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes

11. Within the past five years, has a jurisdiction official (i.e., chief executive, mayor, county chairman, city manager, administrator, or a tribally recognized official, etc.), the local legislative body, or planning commission, directly, or in partnership with major private or public stakeholders, convened or funded comprehensive studies, commissions, or hearings, or has the jurisdiction established a formal ongoing process, to review the rules, regulations, development standards, and processes of the jurisdiction to assess their impact on the supply of affordable housing?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
12. Within the past five years, has the jurisdiction initiated major regulatory reforms either as a result of the above study or as a result of information identified in the barrier component of the jurisdiction's "HUD Consolidated Plan?" If yes, attach a brief list of these major regulatory reforms.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
13. Within the past five years has your jurisdiction modified infrastructure standards and/or authorized the use of new infrastructure technologies (e.g. water, sewer, street width) to significantly reduce the cost of housing?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
14. Does your jurisdiction give "as-of-right" density bonuses sufficient to offset the cost of building below market units as an incentive for any market rate residential development that includes a portion of affordable housing? (As applied to density bonuses, "as of right" means a density bonus granted for a fixed percentage or number of additional market rate dwelling units in exchange for the provision of a fixed number or percentage of affordable dwelling units and without the use of discretion in determining the number of additional market rate units.)	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
15. Has your jurisdiction established a single, consolidated permit application process for housing development that includes building, zoning, engineering, environmental, and related permits? Alternatively, does your jurisdiction conduct concurrent, not sequential, reviews for all required permits and approvals?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
16. Does your jurisdiction provide for expedited or "fast track" permitting and approvals for all affordable housing projects in your community?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
17. Has your jurisdiction established time limits for government review and approval or disapproval of development permits in which failure to act, after the application is deemed complete, by the government within the designated time period, results in automatic approval?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
18. Does your jurisdiction allow "accessory apartments" either as: a) a special exception or conditional use in all single-family residential zones or, b) "as of right" in a majority of residential districts otherwise zoned for single-family housing?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
19. Does your jurisdiction have an explicit policy that adjusts or waives existing parking requirements for all affordable housing developments?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
20. Does your jurisdiction require affordable housing projects to undergo public review or special hearings when the project is otherwise in full compliance with the zoning ordinance and other development regulations?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>Total Points:</b>		

**Part B. State Agencies and Departments or Other Applicants for Projects Located in Unincorporated Areas or Areas Otherwise Not Covered in Part A**

	1	2
1. Does your state, either in its planning and zoning enabling legislation or in any other legislation, require localities regulating development have a comprehensive plan with a "housing element?" If no, skip to question # 4	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2. Does your state require that a local jurisdiction's comprehensive plan estimate current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate, and middle income families, for at least the next five years?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
3. Does your state's zoning enabling legislation require that a local jurisdiction's zoning ordinance have a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped in these categories, that can permit the building of affordable housing that addresses the needs identified in the comprehensive plan?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
4. Does your state have an agency or office that includes a specific mission to determine whether local governments have policies or procedures that are raising costs or otherwise discouraging affordable housing?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
5. Does your state have a legal or administrative requirement that local governments undertake periodic self-evaluation of regulations and processes to assess their impact upon housing affordability address these barriers to affordability?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
6. Does your state have a technical assistance or education program for local jurisdictions that includes assisting them in identifying regulatory barriers and in recommending strategies to local governments for their removal?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
7. Does your state have specific enabling legislation for local impact fees? If no skip to question #9.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
8. If yes to the question #7, does the state statute provide criteria that sets standards for the allowable type of capital investments that have a direct relationship between the fee and the development ( <i>nexus</i> ) and a method for fee calculation?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
9. Does your state provide significant financial assistance to local governments for housing, community development and/or transportation that includes funding prioritization or linking funding on the basis of local regulatory barrier removal activities?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

<p>10. Does your state have a mandatory state-wide building code that a) does not permit local technical amendments and b) uses a recent version (i.e. published within the last five years or, if no recent version has been published, the last version published) of one of the nationally recognized model building codes (i.e. the International Code Council (ICC), the Building Officials and Code Administrators International (BOCA), the Southern Building Code Congress International (SBCI), the International Conference of Building Officials (ICBO), the National Fire Protection Association (NFPA)) without significant technical amendment or modification?</p> <p>Alternatively, if the state has made significant technical amendment to the model code, can the state supply supporting data that the amendments do not negatively impact affordability?</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>11. Has your jurisdiction adopted specific building code language regarding housing rehabilitation that encourages such rehabilitation through graduated regulatory requirements applicable as different levels of work are performed in existing buildings? Such code language increases regulatory requirements (the additional improvements required as a matter of regulatory policy) in proportion to the extent of rehabilitation that an owner/developer chooses to do on a voluntary basis. For further information see HUD publication: "<i>Smart Codes in Your Community: A Guide to Building Rehabilitation Codes</i>" (<a href="http://www.huduser.org/publications/destech/smartcodes.html">www.huduser.org/publications/destech/smartcodes.html</a>)</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>12. Within the past five years has your state made any changes to its own processes or requirements to streamline or consolidate the state's own approval processes involving permits for water or wastewater, environmental review, or other State-administered permits or programs involving housing development. If yes, briefly list these changes.</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>13. Within the past five years, has your state (i.e., Governor, legislature, planning department) directly or in partnership with major private or public stakeholders, convened or funded comprehensive studies, commissions, or panels to review state or local rules, regulations, development standards, and processes to assess their impact on the supply of affordable housing?</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>14. Within the past five years, has the state initiated major regulatory reforms either as a result of the above study or as a result of information identified in the barrier component of the states' "Consolidated Plan submitted to HUD?" If yes, briefly list these major regulatory reforms.</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>15. Has the state undertaken any other actions regarding local jurisdiction's regulation of housing development including permitting, land use, building or subdivision regulations, or other related administrative procedures? If yes, briefly list these actions.</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p><b>Total Points:</b></p>		

Robert N. Brown, Director  
Cleveland Planning Commission  
June 9, 2008

## Grant Application Detailed Budget Worksheet

(Exp. 01/31/2009)

Name and Address of Applicant:

Sub Grantee - Year 1

Environmental Health Watch

3500 Lorain Ave. #302

Cleveland, OH 44113

Grantee: Sweetland Center for Environmental Health, Cleveland

Category	Detailed Description of Budget (for full grant period)				HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
	Estimated Hours	Rate per Hour	Estimated Cost	HUD Share								
1. Personnel (Direct Labor)												
Position or Individual												
30% - Field Manager.	624	\$26.25	\$16,380		\$10,920							
60% - Environmental Health Specialist	1,248	\$20.05	\$25,024		\$25,024							
20% - Housing Technician	416	\$19.09	\$7,943		\$7,943							
25% - Health Educator	520	\$20.05	\$10,427		\$10,427							
10% - Data Manager	208	\$22.89	\$4,761		\$4,761							
Total Direct Labor Cost			\$64,535		\$59,075							
2. Fringe Benefits												
Rate (%)		Base	Estimated Cost		HUD Share							
45%		\$16,380	\$7,371		\$4,914							
41%		\$25,024	\$10,260		\$10,260							
15%		\$7,943	\$1,191		\$1,191							
39%		\$10,427	\$4,066		\$4,066							
35%		\$4,761	\$1,666		\$1,666							
Total Fringe Benefits Cost			\$24,555		\$22,098							
3. Travel												
3a. Transportation - Local Private Vehicle												
5 trips avg x 20 mi avg x 53 units x 110%												
Subtotal - Trans - Local Private Vehicle												
3b. Transportation - Airfare (show destination)												
Subtotal - Transportation - Airfare												
3c. Transportation - Other												
Subtotal - Transportation - Other												
3d. Per Diem or Subsistence (Indicate location)												
Subtotal - Per Diem or Subsistence												
Total Travel Cost												
4. Equipment (Only items over \$5,000 Depreciated value)												
Total Equipment Cost												
5. Supplies and Materials (Items under \$5,000 Depreciated Value)												
5a. Consumable Supplies												
daily relocation per diem	15	\$50.00	\$750		\$750							



## Grant Application Detailed Budget Worksheet

(Exp. 01/31/2008)

Name and Address of Applicant:

Sub Grantee - Year 1

Environmental Health Watch  
3500 Lorain Ave. #302  
Cleveland, OH 44113

Grantee: Sweetland Center for Environmental Health, Cleveland

## Category

Subtotal - Consumable Supplies

Detailed Description of Budget (for full grant period)

Category	Subtotal - Consumable Supplies	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
5b. Non-Consumable Materials												
PDA's and software for entering home assessments in the field		1	\$800	\$800								
healthy & safety kits for occupant - site-specific array of items (e.g., fire extinguisher, allergen pillow cover, electric outlet covers)		53	\$300.00	\$15,900								
Low-level interventions - materials		53	\$200.00	\$10,600								
Subtotal - Non-Consumable Materials				\$27,300								
Total Supplies and Materials Cost				\$28,050								
6. Consultants (Type)												
- Quality Control		25	\$50.00	\$1,250								
Total Consultants Cost				\$1,250								
7. Contracts and Sub-Grantees (List Individually)												
Community Housing Solutions		32	\$200.00	\$6,400								
Lab services - dust analysis for lead		60	\$70.00	\$4,200								
Lab services - dust analysis for allergens		60	\$80.00	\$5,400								
Total Subcontracts Cost				\$16,000								
8. Construction Costs												
Total Construction Costs				\$0								
9. Other Direct Costs												
Liability Insurance			\$7,500	\$7,500								
Total Other Direct Costs				\$7,500								
Subtotal of Direct Costs				\$145,388								
10. Indirect Costs												
Type		Rate	Base	Estimated Cost								
		12.00%	\$145,388	\$17,447								
Total Indirect Costs				\$17,447								
Total Estimated Costs				\$162,834								



## **BUDGET JUSTIFICATION**

### **Case Healthy Homes & Patients Program**

#### **Swetland Center for Environmental Health:**

- **Personnel:** (-salaries incremented 3% per year)

██████████, Principal Investigator/ Project Director, 20% effort (8 h/wk) (half cost shared)

-Provides general project oversight and coordination of partner organizations; orient the medical residents to CHHAP Program; review health tracking forms with residents; advisor/sponsor of two summer student projects each year; prepares quarterly and final reports.

██████████, RN, Swetland Project Manager, 50% effort (20 h/wk)

-Coordinates the day-to-day CHHAP activities; maintains central database of participants' housing and health events; answers participants' and residents' questions; assists in preparation of quarterly and final reports.

██████████, secretary/scheduler, 20% effort (8 h/wk) – all cost-shared

-Schedules primary home visits between patients, medical residents, and EHW inspectors; data entry; telephone triage.

██████████, MD, Family Medicine Resident Coordinator, 3% effort (1.2h/wk)

-Provides general oversight of the residents' clinic; assists in Family Medicine resident recruitment/ patient retention; oversight of resident/ patient assignments;

██████████, MD, Pediatrics Resident Coordinator, 5% effort (2h/wk)

- Provides general oversight of the residents' clinic; assists in Pediatric resident recruitment/ patient retention; oversight of resident/ patient assignments

██████████, MD, Geriatric Center (House Call Program) Coordinator, 5% effort (2h/wk)

- Provides general oversight of the House Call Program interface with CHHAP; assists in Family Medicine, Medicine, and Geriatric fellow and elderly patient recruitment; oversight of resident/ patient assignments

██████████, PhD, epidemiologist/biostatistician, 5% effort (2h/wk)

- **Fringe Benefits:** at federally negotiated rate of 26.5% of salary
- **Consultant:** ██████████, PhD, IDEAS Institute, elderly housing assessment and intervention expert, 3 sessions per years @\$350 = \$1050.
- **Travel:**-one HUD grantee meeting for two people ██████████ & ██████████ in each year.
- **Supplies:**  
-update database software in first year; general office supplies estimated at \$2350/yr.

- **Other Costs:**

-Summer Student Stipends- one per year at standard school rate of \$3000.

-Postage- mailings to patients/ heads of household regarding schedules of visits, interventions; 1<sup>st</sup> year- 50 x 3; 2<sup>nd</sup>/3<sup>rd</sup> years- 100 x 3.

-Photocopying- educational materials for recruiters/students/patients; demographic forms, health event forms; 4000 x 0.03/yr.

-Printing- recruitment brochures; educational materials; 2500 x 0.10/yr.

- **Indirect Costs:** One half of federal negotiated rate of 57%. Equivalent amount provided as matching funds by CWRU.

**Environmental Health Watch** - Total sub-grant of \$480,329.

**1. Personnel:** -salaries incremented 4% per year

- [REDACTED], Field Manager, 30% effort ([REDACTED] cost shared): manages home visits, inspections, action plans, low-level remediation, specification writing, contractor remediation, QC, training.
- [REDACTED], Environmental Specialist, 60% effort: conducts inspections, action plans, education, low-level building interventions, and referrals.
- [REDACTED], Housing Technician, 20% effort: conducts low-level building interventions.
- [REDACTED], Health Educator, 25% effort: conducts occupant education, follow-up, outreach.
- [REDACTED], Data Manager, 10% effort: manages tracking and other project databases.

**2. Fringe Benefits:** FICA/MC=7.65%, Worker Comp=1%, UE=7.5%, retirement=4%, health-life-disability insurance vary by age and family size.

**3a. Transportation – Local Private Vehicle:** 5 trips (+10% for not home) x 20 miles (roundtrip) x 53 units/yr @ \$0.60 per mile year 1; 20% inflation increases years 2 and 3.

**5a. Consumable Supplies:** per diem for daily relocation - \$50 x 60 units.

**5b. Non-Consumable Materials**

- **PDA and software:** for completing visual assessment forms in the field – \$800/year 1; for years 2 and 3, \$300 each for equipment and software upgrades.
- **Health & safety items for occupants:** e.g., HEPA vacuum, fire extinguisher, allergen pillow cover, electric outlet covers – average \$300/unit x 53 units year 1; for years 2 and 3, 5% inflation increases.
- **Low-level intervention materials:** e.g., IPM, cleaning, hardware; average \$200/unit x 53 units year 1; for years 2 and 3, 5% inflation increases.

**6. Consultants:** [REDACTED] intervention design, QC consulting; 25 hours/year at \$50/hour.

**7. Contracts:**

- **Community Housing Solutions:** assistance with referrals for weatherization/repair/modification/remediation; 32 units/year at \$200 per unit.
- **Lab services – dust analysis for lead:** 10 samples/unit, \$7/sample, 30 units/yr (pre and post) year 1; for years 2 and 3, 5% inflation increases.
- **Lab services – dust analysis for allergens:** average \$90/unit for 2 allergens, 30 units/yr (pre and post) for year 1; for years 2 and 3, 5% inflation increases.

**8. Other Direct – liability insurance:** \$7,500 year 1; for years 2 and 3, 5% inflation increases.

**Indirect Costs:** 12% negotiated with the Case Swetland Center.

**Cleveland Department of Public Health** – Total sub-grant of \$15,000

-Participation of CDPH personnel in quarterly project meetings; coordination of referrals to city lead hazard control and other programs; troubleshooting difficult landlords. Evaluation of feasibility of Moms First (pregnant women home visit program) adopting project elements.

**Neighborhood Leadership Institute** – Total sub-grant of \$5,250

-Organize and manage Community Advisory Board including recruiting community members and soliciting community input and responses. Three meetings year one and two meetings each year thereafter for total of 7 meetings; 15 h/ meeting x 7 x \$50/h = \$5,250.

<b>America's Affordable Communities Initiative</b>	<b>U.S. Department of Housing and Urban Development</b>	OMB approval no. 2510-0013 (exp. 01/01/2006)
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Public reporting burden for this collection of information is estimated to average 3 hours. This includes the time for collecting, reviewing, and reporting the data. The information will be used to encourage applicants to pursue and promote efforts to remove regulatory barriers to affordable housing. Response to this request for information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

## Questionnaire for HUD's Initiative on Removal of Regulatory Barriers

### Part A. Local Jurisdictions. Counties Exercising Land Use and Building Regulatory Authority and Other Applicants Applying for Projects Located in such Jurisdictions or Counties [Collectively, Jurisdiction]

	1	2
1. Does your jurisdiction's comprehensive plan (or in the case of a tribe or TDHE, a local Indian Housing Plan) include a "housing element? A local comprehensive plan means the adopted official statement of a legislative body of a local government that sets forth (in words, maps, illustrations, and/or tables) goals, policies, and guidelines intended to direct the present and future physical, social, and economic development that occurs within its planning jurisdiction and that includes a unified physical plan for the public development of land and water. If your jurisdiction does not have a local comprehensive plan with a "housing element," please enter no. If no, skip to question # 4.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
2. If your jurisdiction has a comprehensive plan with a housing element, does the plan provide estimates of current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate and middle income families, for at least the next five years?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
3. Does your zoning ordinance and map, development and subdivision regulations or other land use controls conform to the jurisdiction's comprehensive plan regarding housing needs by providing: a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped "as of right" in these categories, that can permit the building of affordable housing addressing the needs identified in the plan? (For purposes of this notice, "as-of-right," as applied to zoning, means uses and development standards that are determined in advance and specifically authorized by the zoning ordinance. The ordinance is largely self-enforcing because little or no discretion occurs in its administration.). If the jurisdiction has chosen not to have either zoning, or other development controls that have varying standards based upon districts or zones, the applicant may also enter yes.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
4. Does your jurisdiction's zoning ordinance set minimum building size requirements that exceed the local housing or health code or is otherwise not based upon explicit health standards?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

<p>5. If your jurisdiction has development impact fees, are the fees specified and calculated under local or state statutory criteria? If no, skip to question #7. Alternatively, if your jurisdiction does not have impact fees, you may enter yes.</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>6. If yes to question #5, does the statute provide criteria that sets standards for the allowable type of capital investments that have a direct relationship between the fee and the development (nexus), and a method for fee calculation?</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>7. If your jurisdiction has impact or other significant fees, does the jurisdiction provide waivers of these fees for affordable housing?</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>8. Has your jurisdiction adopted specific building code language regarding housing rehabilitation that encourages such rehabilitation through graduated regulatory requirements applicable as different levels of work are performed in existing buildings? Such code language increases regulatory requirements (the additional improvements required as a matter of regulatory policy) in proportion to the extent of rehabilitation that an owner/developer chooses to do on a voluntary basis. For further information see HUD publication: "<i>Smart Codes in Your Community: A Guide to Building Rehabilitation Codes</i>" (<a href="http://www.huduser.org/publications/destech/smartcodes.html">www.huduser.org/publications/destech/smartcodes.html</a>)</p>	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
<p>9. Does your jurisdiction use a recent version (i.e. published within the last 5 years or, if no recent version has been published, the last version published) of one of the nationally recognized model building codes (i.e. the International Code Council (ICC), the Building Officials and Code Administrators International (BOCA), the Southern Building Code Congress International (SBCI), the International Conference of Building Officials (ICBO), the National Fire Protection Association (NFPA)) without significant technical amendment or modification. In the case of a tribe or TDHE, has a recent version of one of the model building codes as described above been adopted or, alternatively, has the tribe or TDHE adopted a building code that is substantially equivalent to one or more of the recognized model building codes?</p> <p>Alternatively, if a significant technical amendment has been made to the above model codes, can the jurisdiction supply supporting data that the amendments do not negatively impact affordability.</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>10. Does your jurisdiction's zoning ordinance or land use regulations permit manufactured (HUD-Code) housing "as of right" in all residential districts and zoning classifications in which similar site-built housing is permitted, subject to design, density, building size, foundation requirements, and other similar requirements applicable to other housing that will be deemed realty, irrespective of the method of production?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes

11. Within the past five years, has a jurisdiction official (i.e., chief executive, mayor, county chairman, city manager, administrator, or a tribally recognized official, etc.), the local legislative body, or planning commission, directly, or in partnership with major private or public stakeholders, convened or funded comprehensive studies, commissions, or hearings, or has the jurisdiction established a formal ongoing process, to review the rules, regulations, development standards, and processes of the jurisdiction to assess their impact on the supply of affordable housing?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
12. Within the past five years, has the jurisdiction initiated major regulatory reforms either as a result of the above study or as a result of information identified in the barrier component of the jurisdiction's "HUD Consolidated Plan?" If yes, attach a brief list of these major regulatory reforms.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
13. Within the past five years has your jurisdiction modified infrastructure standards and/or authorized the use of new infrastructure technologies (e.g. water, sewer, street width) to significantly reduce the cost of housing?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
14. Does your jurisdiction give "as-of-right" density bonuses sufficient to offset the cost of building below market units as an incentive for any market rate residential development that includes a portion of affordable housing? (As applied to density bonuses, "as of right" means a density bonus granted for a fixed percentage or number of additional market rate dwelling units in exchange for the provision of a fixed number or percentage of affordable dwelling units and without the use of discretion in determining the number of additional market rate units.)	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
15. Has your jurisdiction established a single, consolidated permit application process for housing development that includes building, zoning, engineering, environmental, and related permits? Alternatively, does your jurisdiction conduct concurrent, not sequential, reviews for all required permits and approvals?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
16. Does your jurisdiction provide for expedited or "fast track" permitting and approvals for all affordable housing projects in your community?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
17. Has your jurisdiction established time limits for government review and approval or disapproval of development permits in which failure to act, after the application is deemed complete, by the government within the designated time period, results in automatic approval?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
18. Does your jurisdiction allow "accessory apartments" either as: a) a special exception or conditional use in all single-family residential zones or, b) "as of right" in a majority of residential districts otherwise zoned for single-family housing?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
19. Does your jurisdiction have an explicit policy that adjusts or waives existing parking requirements for all affordable housing developments?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
20. Does your jurisdiction require affordable housing projects to undergo public review or special hearings when the project is otherwise in full compliance with the zoning ordinance and other development regulations?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>Total Points:</b>		

**Part B. State Agencies and Departments or Other Applicants for Projects Located in Unincorporated Areas or Areas Otherwise Not Covered in Part A**

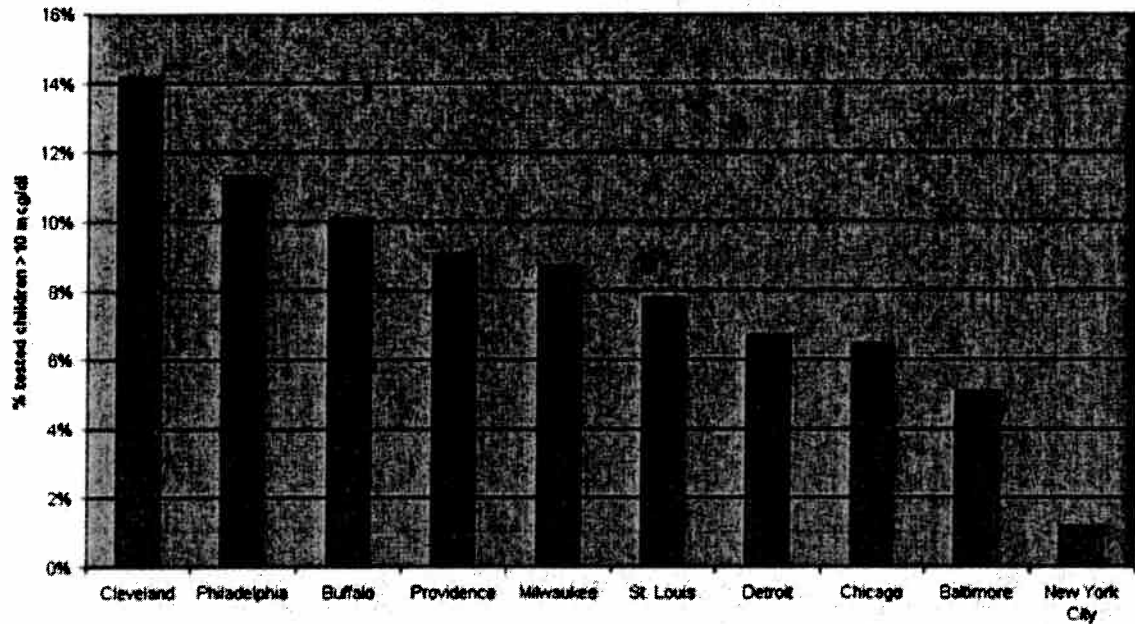
	1	2
1. Does your state, either in its planning and zoning enabling legislation or in any other legislation, require localities regulating development have a comprehensive plan with a "housing element?" If no, skip to question # 4	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2. Does your state require that a local jurisdiction's comprehensive plan estimate current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate, and middle income families, for at least the next five years?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
3. Does your state's zoning enabling legislation require that a local jurisdiction's zoning ordinance have a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped in these categories, that can permit the building of affordable housing that addresses the needs identified in the comprehensive plan?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
4. Does your state have an agency or office that includes a specific mission to determine whether local governments have policies or procedures that are raising costs or otherwise discouraging affordable housing?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
5. Does your state have a legal or administrative requirement that local governments undertake periodic self-evaluation of regulations and processes to assess their impact upon housing affordability address these barriers to affordability?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
6. Does your state have a technical assistance or education program for local jurisdictions that includes assisting them in identifying regulatory barriers and in recommending strategies to local governments for their removal?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
7. Does your state have specific enabling legislation for local impact fees? If no skip to question #9.	<input type="checkbox"/> No	<input type="checkbox"/> Yes
8. If yes to the question #7, does the state statute provide criteria that sets standards for the allowable type of capital investments that have a direct relationship between the fee and the development ( <i>nexus</i> ) and a method for fee calculation?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
9. Does your state provide significant financial assistance to local governments for housing, community development and/or transportation that includes funding prioritization or linking funding on the basis of local regulatory barrier removal activities?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

<p>10. Does your state have a mandatory state-wide building code that a) does not permit local technical amendments and b) uses a recent version (i.e. published within the last five years or, if no recent version has been published, the last version published) of one of the nationally recognized model building codes (i.e. the International Code Council (ICC), the Building Officials and Code Administrators International (BOCA), the Southern Building Code Congress International (SBCI), the International Conference of Building Officials (ICBO), the National Fire Protection Association (NFPA)) without significant technical amendment or modification?</p> <p>Alternatively, if the state has made significant technical amendment to the model code, can the state supply supporting data that the amendments do not negatively impact affordability?</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>11. Has your jurisdiction adopted specific building code language regarding housing rehabilitation that encourages such rehabilitation through graduated regulatory requirements applicable as different levels of work are performed in existing buildings? Such code language increases regulatory requirements (the additional improvements required as a matter of regulatory policy) in proportion to the extent of rehabilitation that an owner/developer chooses to do on a voluntary basis. For further information see HUD publication: "<i>Smart Codes in Your Community: A Guide to Building Rehabilitation Codes</i>" (<a href="http://www.huduser.org/publications/destech/smartcodes.html">www.huduser.org/publications/destech/smartcodes.html</a>)</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>12. Within the past five years has your state made any changes to its own processes or requirements to streamline or consolidate the state's own approval processes involving permits for water or wastewater, environmental review, or other State-administered permits or programs involving housing development. If yes, briefly list these changes.</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>13. Within the past five years, has your state (i.e., Governor, legislature, planning department) directly or in partnership with major private or public stakeholders, convened or funded comprehensive studies, commissions, or panels to review state or local rules, regulations, development standards, and processes to assess their impact on the supply of affordable housing?</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>14. Within the past five years, has the state initiated major regulatory reforms either as a result of the above study or as a result of information identified in the barrier component of the states' "Consolidated Plan submitted to HUD?" If yes, briefly list these major regulatory reforms.</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p>15. Has the state undertaken any other actions regarding local jurisdiction's regulation of housing development including permitting, land use, building or subdivision regulations, or other related administrative procedures? If yes, briefly list these actions.</p>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
<p><b>Total Points:</b></p>		

Robert N. Brown, Director  
Cleveland Planning Commission  
June 9, 2008



**Rates of Lead Poisoning in Cities with the Highest Number of Poisoned Children (2003 testing data)**



**Top Ten Cities for Number of Children Tested >10 mcg/dl (2003 test data)**

City	% of tested >10 mcg/dl	# of tested ≥10 mcg/dl	# of pre-1950 Housing Units	% pre-1950	# of children tested	% tested
Cleveland	14%	2,329	142,817	66%	16,461	36%
Philadelphia	11%	4,384	386,382	57%	38,767	33%
Buffalo	10%	675	106,351	73%	6,702	27%
Providence	9%	992	39,800	59%	11,008	75%
Milwaukee	9%	1,999	116,338	47%	22,904	40%
St. Louis	8%	936	95,091	65%	12,011	42%
Detroit	7%	2,104	210,588	56%	31,516	34%
Chicago	6%	6,691	602,934	52%	103,701	40%
Baltimore	5%	1,030	113,955	65%	20,294	41%
New York City	1%	3,526	1,842,098	51%	304,130	47%

Data from the Alliance for Healthy Homes

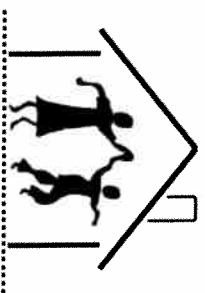
TO ENROLL CALL:

The Mary Ann Swetland Center for  
Environmental Health,  
Case Western Reserve University  
(216) 368-5967

INSPECTIONS PERFORMED BY:

Environmental Health Watch  
<http://www.ehw.org/>

**[REDACTED]** Executive Director  
(216) 961-4646



**Thank you  
for considering  
our program!!**

# **The Family Medicine Geriatric Program**

and the

## **Case Healthy Homes &**

### **Patients Program**



The Case Healthy Homes and Patients Program is  
a joint program of Case Western Reserve  
University School of Medicine, Mary Ann  
Swetland Center for Environmental Health,  
Environmental Health Watch, the Cuyahoga  
County Board of Health, the Cleveland  
Department of Public Health, & Community  
Housing Solutions

## **The Case Healthy Homes & Patients Program**

is a special part of the

**Family Medicine House Call Program**  
that helps you make a safer home for you  
and your family. As part of this program,  
the resident doctor & a home safety  
expert make a free visit to your home.

The safety expert will look for problems  
like fall hazards, lead, pests, mold & water  
damage, & things that trigger asthma.

The safety expert will help plan things  
that need fixing to make your home safer  
& will teach you how to keep your home  
safe.

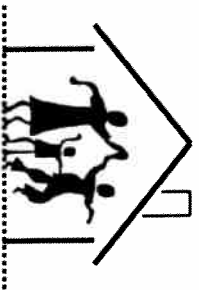
## **GET A FREE HEALTH & SAFETY INSPECTION & FREE ITEMS**

**You May Be Interested In  
This Program If:**

- You are interested in having a  
free safety check to make your  
home a safer place for you and  
your family
- You are interested in learning  
about having a safer home
- You are interested in having some  
problems such as fall hazards &  
mold damage in your home  
repaired at no charge to you.

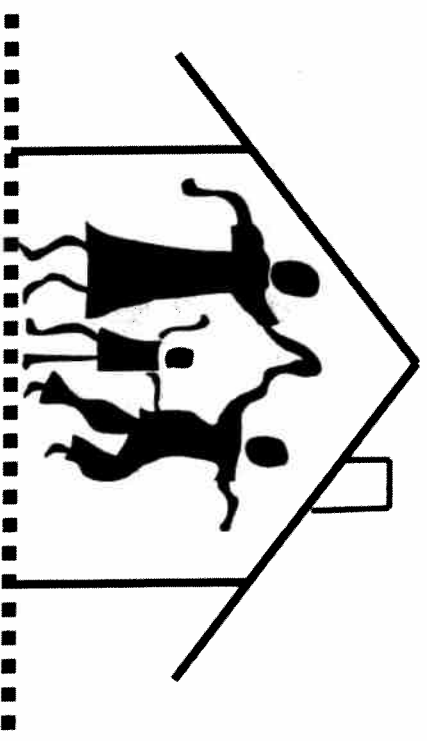
**TO ENROLL CALL:**  
**The Mary Ann Swetland Center for  
Environmental Health,  
Case Western Reserve University**  
**(216) 368-5967**

**INSPECTIONS PERFORMED BY:**  
**Environmental Health Watch**  
**<http://www.ehw.org/>**  
**[REDACTED], Executive Director**  
**(216) 961-4646**



**Thank you  
for considering  
our program!!**

# **The Family Clinic Program and the Case Healthy Homes & Patients Program**



The Case Healthy Homes and Babies Program is a joint program of Case Western Reserve University School of Medicine, Mary Ann Swetland Center for Environmental Health, Environmental Health Watch, the Cuyahoga County Board of Health, the Cleveland Department of Public Health, & the Community Housing Solutions

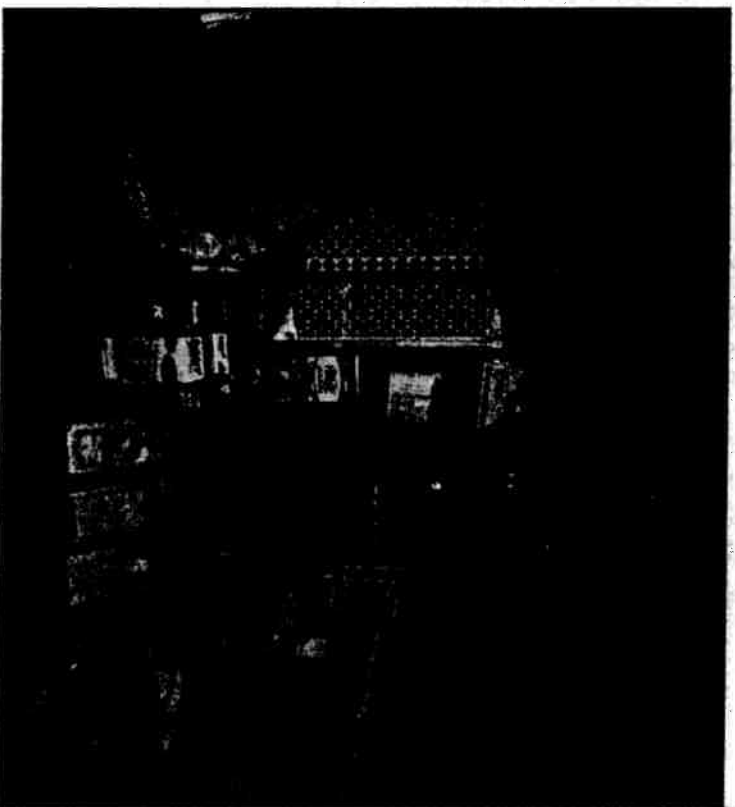
## **The Case Healthy Homes and Patients Program**

is a special part of the

**Family Medicine Clinic Program &**

**Case Western Reserve University**

that helps you make a safer home for your new baby.



As part of this program, the resident doctor & a

home safety expert make a free visit to your home.

The safety expert will look for problems like lead, mold & water damage, & things that trigger asthma.

The safety expert will help plan things that needs fixing to make your home safer & will teach you how to keep your home safe.

### **YOU MAY BE INTERESTED IN THIS PROGRAM IF:**

- You come to all your clinic visits
- You can come to visits in the afternoon
- You are at least 16 years old
- You are healthy, with a healthy pregnancy
- You will use our Program's doctors for your baby
- You are interested in having a free safety check to make your home a safer place for your new baby & family
- You are interested in learning about having a safer home
- You are interested in having problems such as lead hazards & mold damage in your home repaired at no charge to you



Cleveland Environmental Center #302  
3500 Lorain Ave., Cleveland OH 44113  
(216) 961-4646 (fax) 961-7179  
e-h-w@ehw.org www.ehw.org

June 19, 2008

[REDACTED], MD, PhD  
Swetland Center for Environmental Health  
Case School of Medicine  
Cleveland, Ohio 44116

Re: Case Healthy House and Patients (CHHAP)

Dear [REDACTED]:

I am delighted to confirm Environmental Health Watch's commitment to participate in the CHHAP program, as described in your proposal in response to the HUD Healthy House Demonstration Grant NOFA. EHW will manage and conduct the home hazard inspections, the action plan development, work order writing, and low-level building interventions and will manage referrals for lead hazard control, weatherization and other higher level work. Our building science consultant, Jim LaRue, will assist in the design of interventions and conduct quality control field observations of hazard assessment, specification writing and remediation.

Built on the success of our current healthy house project, this new proposal expands and intensifies that effort. Our very positive experience with the innovative physician education component of the current project convinces me of the great value of an expansion to include pediatric residents and more geriatric visits. Recruiting patients from the University Hospital clinics insures meeting enrollment targets and the participation of the patient's physicians in the home visits literally and figuratively "opens the door" for us. The opportunity for extending regular medical follow-up through clinic visits provides a unique opportunity to monitor housing-related health outcomes.

All of the project partners have a long history of effective collaboration on housing intervention projects. Your proposal effectively builds on this considerable healthy house experience.

I look forward to working on this exciting public health and medical education initiative for the Cleveland area.

Best regards,

[REDACTED]  
[REDACTED]  
Executive Director



12114 LARCHMERE BOULEVARD  
CLEVELAND, OHIO 44120  
P 216.231.5815  
F 216.231.5845

ADMINISTRATION  
HOUSING COUNSELING  
TOOL LOAN  
HOUSING REHABILITATION  
NEW CONSTRUCTION

EMAIL INQUIRIES: INFO@COMMHOUSINGSOLUTIONS.ORG

1967 WEST 45TH STREET  
CLEVELAND, OHIO 44102  
P 216.651.0077  
F 216.651.0072

ENERGY CONSERVATION  
HOME REPAIR  
HOUSING COUNSELING  
TOOL LOAN

June 23, 2008

[REDACTED] PhD, MD  
Mary Ann Swetland Center for Environmental Health  
Case Western Reserve University  
Cleveland, Ohio 441106

**Re: Case Healthy Homes and Patients (CHHAP)**

Dear [REDACTED]

Community Housing Solutions is pleased to send this letter of commitment to participate in the Swetland Center's CHHAP, as described in its application to the HUD Healthy House Demonstration Grant Program. CHHAP will incorporate and build upon many of the building intervention techniques learned through our collaboration with you and other key partners in various healthy house projects over the last year. We are excited to continue our role and look forward to assisting many more families. Over the three years of the project, CHS will provide a number of services, listed below, to program participants and commits the following leveraged funds:

- Weatherization: HWAP and Housewarming  
12 homes/ year x \$3,000 per home x 3 years [REDACTED]
- Home Repair  
20 homes/year x \$1,500 per home x 3 years [REDACTED]
- In-kind staff supervision  
\$10,000/year x 3 years [REDACTED]

Total CHS Leveraged Funds [REDACTED]

If I may provide any further information, do not hesitate to let me know. We look forward to our joint efforts on this very important initiative.

Sincerely,

  
Andy Nikiforovs  
Executive Director





City of Cleveland  
Frank G. Jackson, Mayor

Department of Public Health  
Matt Carroll, Director of Public Health  
1925 St. Clair Avenue  
Cleveland, OH 44114-2080  
216/664-2324 • Fax: 216/664-4370

Thursday, June 19, 2008

Ph.D., M.D.  
Swetland Center for Environmental Health  
Case Western Reserve University, School of Medicine, WG-19  
10900 Euclid Avenue  
Cleveland, Ohio 44106-4940

Re: HUD Healthy Homes Application-Case Healthy Homes and Patients Program(CHHAP)

Dear [REDACTED]

This letter is to state our enthusiastic support for the above Healthy Homes Demonstration application and to establish our commitment for a partnership with you in this program.

We are excited to take part in this unique medical education endeavor. Our Division of Environment staff members look forward to interacting with the Case medical students again and enjoy the opportunity to contribute to their medical careers. How better to introduce them to environmental health than to give them hands-on experience working with inner city families and the health hazards inherent in our older housing stock.

The Department of Public Health's participation in the CHHAB program will primarily be to provide additional home inspection capabilities through our State of Ohio licensed lead based paint risk assessors. As noted in the application budget, our portion of the request is \$15,000 to cover (about 30% of the inspector's salary plus fringe benefits) and a small administrative amount (10%).

The City of Cleveland will provide services to the enrollees of the CHHAB program by leveraging funds from its Lead Hazard Control Grant. The Department will make available up to \$[REDACTED] at \$[REDACTED] per unit (60 units) for Lead Hazard Control in support of this program.

In addition, the Department maintains a close relationship with the City of Cleveland Division of Neighborhood Services and will act as a liaison to assist eligible homeowners in the CHHAB program in securing low interest loans and Community Development Block Grant funds to bring their properties into code compliance. The Department estimates that an additional \$200,000 - 20 loans at a rate of \$10,000 per unit - in such low interest loans, and \$140,000 - 20 grants of \$7,000 per unit for a total of \$340,000 will be used as a result of this program.

I strongly urge the Office of Healthy Homes and Lead Hazard Control to support this demonstration grant proposal for the benefit of the children of the Greater Cleveland area.

Sincerely,

[REDACTED]  
Matthew Carroll  
Director





CUYAHOGA COUNTY BOARD OF HEALTH  
5550 VENTURE DRIVE  
PARMA, OHIO 44130  
(216) 201-2000  
[www.ccbh.net](http://www.ccbh.net)

TERRENCE M. ALLAN, R.S., M.P.H.  
Health Commissioner



**Public Health**  
Prevent. Promote. Protect.

Northeast Ohio Public Health Partnership

June 30, 2008

██████████ Ph.D., M.D.  
Swetland Center for Environmental Health  
Case Western Reserve University  
School of Medicine, WG-19  
10900 Euclid Avenue  
Cleveland, Ohio 44106-4940

Re: Healthy Homes Application-Case Healthy Homes and Patients Program (CHHAP)

Dear ██████████

The purpose of this letter is to express our support for your proposed Healthy Homes proposal entitled "Case Healthy Homes and Patients Program" (CHHAP).

The Cuyahoga County Board of Health is eager to participate in this proposal which will promote the practices of environmental and public health. The opportunity to once again work with the Case medical students will prove to be mutually beneficial. Their practical experience working with inner city families will serve to increase their awareness of the impact of the home environment on human health. Our staff and leadership are excited to take part in this unique medical education endeavor.

Additionally the Cuyahoga County Board of Health will provide Lead Hazard Control services to qualified enrollees of the CHHAB program by leveraging funds from the anticipated Lead Hazard Control Grant. The Board of Health will make available an average of \$9,500 per unit for Lead Hazard Control in support of this program. It is anticipated that we would be able to assist 15 units from the targeted demographic areas for a total leveraged dollar amount of \$142,500.

I would respectfully request that the Office of Healthy Homes and Lead Hazard Control give every consideration to supporting this demonstration grant proposal for the benefit of the children of the Greater Cleveland area.

Sincerely,

██████████

Terrence M. Allan, MPH  
Health Commissioner

*Serving the cities, villages and townships of Cuyahoga County since 1919*



**Neighborhood Leadership Institute**  
1761 East 30th Street, Suite 200  
Cleveland, Ohio 44114

phone: (216) 812-8700  
fax: (216) 812-8709  
[www.neighborhoodleadership.org](http://www.neighborhoodleadership.org)

Mujit Sabur  
*Board President*

Don Slocum  
*Executive Director*

June 19, 2008

[REDACTED], MD, PhD  
Swetland Center for Environmental Health  
Case School of Medicine  
Cleveland, Ohio 44116

Re: Case Healthy House and Patients (CHHAP)

Dear Dr. [REDACTED]

I am please to confirm Neighborhood Leadership Institute's (NLI) commitment to participate in the Case Healthy House and Patients program, as described in your proposal to the HUD Healthy House Demonstration Grant Program.

Neighborhood Leadership Institute will organize a Community Advisory Board made comprised of our Neighborhood Leadership Cleveland graduates from the geographic areas served by the project. In addition to training sessions, the CAB will meet with key project staff throughout the course of the project to provide feedback on project procedures, give advice on community issues that emerge in the course of the project, make recommendations for project improvement, and review educational material. The NLI staff will also assist with community education and outreach activities.

The Community Advisory Board will receive initial training from project staff on the healthy house concept and approach, the specific health and housing issues addressed in the project, and ethical concerns related to home intervention projects.

I am excited about the opportunity to be part of this innovative project that provides education and material assistance for people struggling to lead healthier lives in housing that too often imperils their health. Bringing doctors into the homes of their patients will help the physicians better understand the role of substandard housing and health.

From my experience, I know that the Community Advisory Board will enhance the project and make its work more effective. Through our various outreach programs, we will be able to work with you to increase community education on the connection between housing and health.

NYL

I look forward to working on this important public health initiative for Cleveland.

Sincerely,

A large, solid black rectangular redaction mark covering the signature of the Executive Director.

Executive Director



**CASE WESTERN RESERVE  
UNIVERSITY**  
SCHOOL OF MEDICINE

**Center for Clinical Investigation**

Clinical and Translational Science Collaborative  
Grant Number UL1 RR024989

**William T. Dahms, MD Clinical Research Unit**  
**Jackson T. Wright, Jr, MD, PhD**  
**Program Director**

June 20, 2008

[REDACTED], Ph.D., M.D.  
Mary Ann Swetland Professor & Chairman  
Department of Environmental Health Sciences  
Director, Swetland Center for Environmental Health  
Case Western Reserve University, School of Medicine  
Cleveland, OH 44106-4940

Re: Case Healthy Homes and Patients Program (DCRU Project # C-1136)

Dear [REDACTED]:

The Dahms Clinical Research Center at Case Western Reserve University is pleased to extend its support for your application to the Department of Housing and Urban Development. As outlined in your proposal, the Informatics Core of the DCRU will provide the assistance of the systems analyst to include: 1) the advice for the maintenance of the centralized database repository (demographic enrollment information, inspection items, specifications, etc.), 2) upgrading the interface of the PDA inspection data with the centralized database repository, 3) ongoing database troubleshooting support, and 4) participation in the end of project data analysis. The estimated time commitment is 150 hours for year 1 and year 3 and 75 hours in year 02 for a total value of [REDACTED]

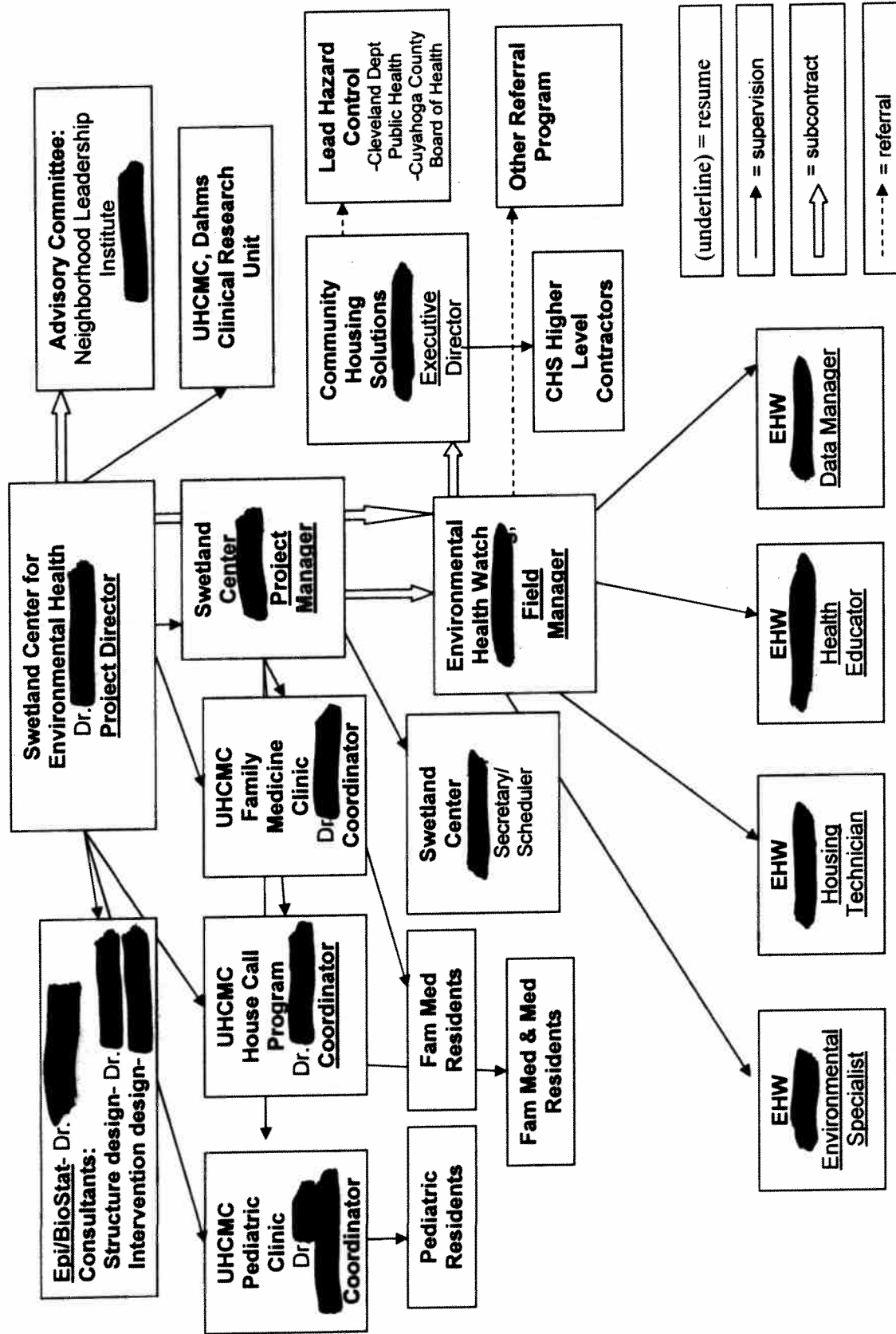
Best wishes for a successful outcome.

Sincerely,

[REDACTED]  
Jackson T. Wright, Jr., M.D., Ph.D.  
Professor of Medicine  
Program Director  
WT Dahms Clinical Research Unit

cc: Informatics Core, CTSC

Swetland Center for Environmental Health, Cleveland  
**Case Healthy Homes & Patients Program**  
**Organizational Chart**



**[REDACTED], PhD, MD** is Mary Ann Swetland Professor and Chairman of Environmental Health Sciences and Director of the Swetland Center for Environmental Health at Case Western Reserve University School of Medicine. In addition, he is Professor of Pediatrics in the Pediatric Pulmonary Division, Department of Pediatrics, Rainbow Babies and Children's Hospital in Cleveland, Ohio. His training, clinical practice, and research interests combine biochemistry with pediatric pulmonary medicine, especially as impacted by environmental fungal exposure. Dr. Dearborn played a major role in recognizing and studying the unusual outbreak of infant pulmonary hemorrhage in Cleveland and is working together with public agencies to understand its cause and to decrease its incidence. In this regard, his laboratory has developed an infant animal model of pulmonary Stachybotryomycotoxinosis and new environmental testing methods for toxic fungi. He is also involved in studies on the impact of mold and moisture on the health of infants and children and was the Medical Director of the Cuyahoga County Urban Mold and Moisture Program, a first round major HUD Healthy Homes grant. His research has been funded by grants from NIH, US EPA, and HUD.

INSTITUTION AND LOCATION	DEGREE	YEAR(s)	FIELD OF STUDY
Williamette University, Salem, OR	B.A.	1961	Chemistry
University of Minnesota, Minneapolis	Ph.D.	1969	Biochemistry
University of Minnesota, Minneapolis	M.D.	1970	Medicine
NIH, NHLBI, Bethesda, MD	Post-Ph.D.	1971-1974	Biochemistry

#### RESEARCH AND PROFESSIONAL EXPERIENCE

1962-1969	M.D. Ph.D. student, University of Minnesota (advisor D.B. Wetlaufer)
1970-1971	Pediatric Intern, University of Minnesota Hospitals
1971-1974	Staff Associate (Sr. Surgeon), Lab. Biochemistry, Section of Cellular Biochemistry and Ultrastructure (Dr. E.D. Korn), NHLI, NIH
1974-1981	Asst. Prof of Biochem and Pediatrics, Director, Cystic Fibrosis Lab, Case Western Reserve University
1979-1985	Research Director, Cleveland Cystic Fibrosis Center, Rainbow Babies Childrens Hospital, CWRU
1981-2001	Associate Professor of Biochemistry and Pediatrics, (tenure)CWRU
1983-1984:	Pediatric Resident, Rainbow Babies and Children's Hospital
1989-1990:	Visiting Scientist, Integrated Genetics/Genzyme (Dr. K. Klinger), Framingham, MA
1990-1994	Member, NIH Biochemistry Study Section, Subcommittee 2
1996-present	Director, Pulmonary Hemosiderosis Prevention Program, CWRU/Cuyahoga County
2001-present	Professor of Pediatrics, Case Western Reserve Univ.
2003-present	Mary Ann Swetland Professor of Environmental Health Science, CWRU
2003-present	Director, Mary Ann Swetland Center for Environmental Health, CWRU
2006-present	Chairman, Department of Environmental Health Sciences, CWRU

#### HONORS AND AWARDS

Phi Lambda Upsilon, Alpha Omega Alpha, NHLBI-Young Investigator, "CF Club" President,

#### PUBLICATIONS (selected peer-reviewed papers from 72)

- Jentoft N and Dearborn DG. Labeling of proteins by reductive methylation using sodium cyanoborohydride. *J Biol Chem* 254:4359-4365, 1979.
- Thomassen MJ, Boxerbaum B, Demko CA, Kuchenbrod PJ, Dearborn DG, and Wood RE. Inhibitory effect of cystic fibrosis serum on *Pseudomonas* phagocytosis by rabbit and human alveolar macrophages. *Pediatr Res* 13:1085, 1979.
- Jentoft JE, Gerken TA, Jentoft NH and Dearborn DG.  $^{13}\text{C}$  methylated ribonuclease A:  $^{13}\text{C}$  NMR studies of the interaction of lysine 41 with active site ligands. *J Biol Chem* 256:231-236, 1981.
- Gerken TA, Jentoft JE, Jentoft N, and Dearborn DG. Intramolecular interactions of amino groups in  $^{13}\text{C}$ -reductively methylated hen egg white lysozyme. *J Biol Chem* 257:2894-2900, 1982.
- Poncz, L, Dearborn, DG: The resistance to tryptic hydrolysis of peptide bonds adjacent to N,N-dimethyllysyl residues. *J. Biol Chem.* 258:1844-1850, 1983.
- Gerken TA, Dearborn DG.  $^{13}\text{C}$  NMR studies of the submaxillary mucin from sheep. *Biochemistry* 23:1485-1497, 1984

- Bruce MC, Poncz L, Klinger JK, Stern RC, Tomashefski J, Dearborn DG. Biochemical and pathological evidence for proteolytic destruction of lung connective tissue in the cystic fibrosis patient. *Am Rev Respir Dis* 132:770-776, 1985.
- Dearborn DG, Infeld MD, Smith P, Judge C, Horgan TE, Allan T, Zimomra J, Mortensen BK, Burkett SA, Winpisinger-Slay and Wagner S. Acute pulmonary hemorrhage/hemosiderosis among infants-Cleveland, January 1993-November 1994. *Morbidity Mortality Weekly Report*, Dec. 9, 1994, 43:881-883 (also appeared in *J Am Med Assoc* 273:280-281, 1995.)
- Manavalan P, Dearborn DG, McPherson JM, and Smith AE. Sequence homologies between nucleotide binding regions of CFTR and G-proteins suggest structural and functional similarities. *FEBS Letters* 366:87-91, 1995.
- Yike I, Ye J, Zhang Y, Manavalan P, Gerken TA, and Dearborn DG. A recombinant peptide model of the first nucleotide-binding fold of the cystic fibrosis transmembrane conductance regulator: comparison of wild-type and  $\Delta F508$  mutant forms. *Protein Science* 5:89-97, 1996.
- Yike I, Zhang Y, Ye J, and Dearborn DG. Expression in *Escherichia coli* of cytoplasmic portions of the cystic fibrosis transmembrane conductance regulator: apparent bacterial toxicity of peptides containing R-domain sequences. *Protein Expression Purif* 7:45-50, 1996.
- Jarvis, Bruce, Zhou, Yihong, Jiang, Jian, Wang, Shengjun, Sorenson, W.G., Hintikka, E.L., Nikulin, M., Parikka, P., Etzel, Ruth, Dearborn, D.G. Toxigenic Molds in Water-Damaged Buildings: Dechlorogriseofulvins from *Memnoniella echinata*. *J.Natural Products* 59:(6): 553-554, 1996.
- Montana E, Etzel RA, Allan T, Horgan TE, and Dearborn DG. Environmental risk factors associated with pediatric idiopathic pulmonary hemorrhage/hemosiderosis in a Cleveland community. *Pediatrics*, 99: vol. 1, 1997.
- Dearborn DG, Infeld MD, Smith PG, Brooks LJ, Carroll-Pankhurst C, Kosick R, Dahms BB, Balraj EK, Challenger R, Allan TM, Horgan TE, Staib R, Wallace, Halpin M.D., TJ, Jarvis BB, Miller JD. Update: Pulmonary Hemorrhage/Hemosiderosis Among Infants-Cleveland, Ohio, 1993-1996. *Morbidity Mortality Weekly Report*, January 17, 1997, 46:33-35.
- Etzel, RA, Montana, E, Sorenson, WG, Kullman, GJ, Allan, TM, and Dearborn, DG. Acute Pulmonary Hemorrhage in Infants Associated with Exposure to *Stachybotrys atra* and Other Fungi. *Arch Pediatr Adolesc Med* 152:757-762, 1998.
- Jarvis, BB, Sorenson, WB, Hintikka, E-L, Nikulin, M., Zhou, Y, Jiang, J, Wang, S, Hinkley, S, Etzel, RA, and Dearborn, DG. Studies of Toxin Production by Isolates of *Stachybotrys atra* and *Memnoniella echinata* Isolated from Homes Associated with Pulmonary Hemosiderosis in Infants. *Applied Environ. Microbiol.* 64:3620-3625, 1998.
- Yike, I, Allan, T, Sorenson, WG, and Dearborn, DG. Highly sensitive protein translation assay for trichothecene toxicity in airborne particulates. Comparison with cytotoxicity assays. *Appl. Environ. Microbiol.* 65:88-94, 1999.
- Dearborn, DG, Yike, I, Sorenson, WG, Miller, MJ, and Etzel, RA, Overview of investigations into pulmonary hemorrhage among infants in Cleveland, Ohio, *Environmental Health Perspectives*, Vol.107,Suppl.3, 495-499, 1999.
- Vesper, SJ, Dearborn, DG, Yike, I, Sorenson, WG, and Haugland, RA, Hemolysis, toxicity, and randomly amplified polymorphic DNA analysis of *Stachybotrys chartarum* strains, *Applied Environ Microbiol*, 65:3175-3181, 1999.
- Tripi, PA, Modlin, S, Sorenson, WG, and Dearborn, DG, Acute pulmonary hemorrhage in an infant during induction of general anesthesia, *Paediatric Anesthesia*.10:92-94, 2000
- Vesper, SJ, Dearborn, DG, Yike, I, Allan, T, Sobolewski, J., Hinkley, SF, Jarvis, BB, and Haugland, RA, Evaluation of *Stachybotrys chartarum* in the house of an infant with idiopathic pulmonary hemorrhage: Quantitative assessment before, during, and after remediation. *J. Urban Health: Bulletin of the New York Academy of Medicine*, 77:66-85, 2000.
- Vesper, S, Dearborn, D, Elidemir, O, Haugland, R, Quantification of siderophore and hemolysin from *S. chartarum* strains including a strain isolated from the lung of a child with pulmonary hemorrhage/hemosiderosis, *Applied Environ. Microbiol.* 66:2678-2681, 2000.
- Vesper, SJ, Dearborn, DG, Magnuson, M., Yike, I, Haugland, RA., Initial characterization of the hemolysin, stachylysin, from *Stachybotrys chartarum*, *Infect Immun*, 69:912-916, 2001.
- Tripi PA, Thomas S, Dearborn DG Management of general anesthesia in infants and children with a history of idiopathic pulmonary hemorrhage. *Paediatric Anaesthesia*, 2002; 12:243-247.

- Yike, I., Miller, MJ, Sorenson, WG, Walenga, R, Tomashefski, JF, Dearborn, DG. Infant animal model of pulmonary mycotoxicosis induced by *Stachybotrys chartarum*. *Mycopathologia*, 154:139-152, 2001.
  - Dearborn, DG, Smith, PG, Dahms, BB, Allan, TM, Sorenson, WG, Montana, E, Etzel, RA, Clinical profile of thirty infants with acute idiopathic pulmonary hemorrhage in Cleveland. *Pediatrics* 110:627-637, 2002.
  - Yike, I, Miller, MJ, Sorenson, WG, Walenga, R, Tomashefski, JF, Dearborn, DG. Infant animal model of pulmonary mycotoxicosis induced by *Stachybotrys chartarum*. *Mycopathologia*, 154:139-152, 2001.
  - Yike, I, Vesper, SJ, Tomashefski, JF, Dearborn, DG. Germination, viability, and clearance of *Stachybotrys chartarum* in the lungs of infant rats. *Mycopathologia*, 156:67-75, 2002.
  - Gregory, L, Rand, TG, Dearborn, DG, Yike, I, Vesper, S. Immunocytochemical localization of stachylysin in *Stachybotry chartarum* spores and spore-impacted mouse and rat tissues. *Mycopathologia*, 156:77-85, 2002.
  - Gregory, L., D. Dearborn, J. Pestka and T. Rand. Localization of satratoxin-G in *Stachybotrys chartarum* spores and spore-impacted mouse lung tissues using immunocytochemistry. *Toxicologic Pathology* 32:1-9, 2004.
  - Vesper, SJ, Varma, M, Wymer, LJ, Dearborn, DG, Sobolewski, J, Haugland, RA. Quantitative polymerase chain reaction analysis of fungi in dust from homes of infants who developed idiopathic pulmonary hemorrhaging, *J Occup Environ Med*, 46:596-601, 2004
  - Yike, I. Rand, T. and Dearborn, DG, "Acute inflammatory responses to *Stachybotrys chartarum* in the lungs of infant rats: time course and possible mechanisms." *Toxicological Sciences* 84:408-417, 2005.
  - Vesper, SJ, McKinstry, C, Yang, C, Haugland, RA, Kercsmar, CM, Yike, I, Schluchter, MD, Kirchner, HL, Sobolewski, J, Allan, TM, Dearborn, DG. Specific molds associated with asthma in water-damaged homes. *J Occup Environ Med* 2006, 48:852-858.
  - Kercsmar, CM. Dearborn, DG, Schluchter, M, Xue, L, Kirchner, HL, Sobolewski, J, Greenberg, S, Vesper, SJ, Allan, TM, Reduction in Asthma Morbidity in Children as a Result of Home Remediation Aimed at Moisture Sources, *Environ Hlth Perspect*, 2006, 114:1574-1580.
  - Yike, I, Distler, AM, Ziady, AG, Dearborn, DG, Mycotoxin Adducts on Human Serum Albumin: Biomarkers of Exposure to *Stachybotrys chartarum*. *Environ Hlth Perspect*, 2006, 114:1221-1226.
  - Chew, G, Wilson, J, Rabito, F, Grimsley, F, Iqbal, S, Reponen, T, Muilenberg, M, Thorne, P, Dearborn, D, and Morley, R, Mold and Endotoxin Levels in the Aftermath of Hurricane Katrina: A Pilot Project of Homes in New Orleans Undergoing Renovation. *Environ Hlth Perspect*, 2006, 114:1883-1889.
  - Mader, D, Yike, I, Distler, A, Dearborn, D. Acute pulmonary hemorrhage in two cats during anesthesia associated with exposure to toxic black mold (*Stachybotrys chartarum*), *J Am Vet Med Assoc*, 2007, 231:731-735.
  - Yike I., Rand, T., Dearborn, D.G. The role of fungal proteinases in pathophysiology of *Stachybotrys chartarum*. *Mycopathologia*, 2007, 164:171-181.
- SELECTED REVIEW ARTICLES / CHAPTERS (from 12)
- Dearborn DG. Pulmonary hemorrhage in infants and children, *Current Opinion in Pediatrics*, 9:219-224, 1997.
  - Dearborn DG. Pulmonary Hemosiderosis, in *Nelson's Textbook of Pediatrics*, 16<sup>th</sup> ed, p1295-1297, 2000. 17<sup>th</sup> ed, p1455-1457, 2004.
  - Yike, I, Dearborn, D.G. Pulmonary effects of *Stachybotrys chartarum* in animal studies. *Adv Applied Microbiology*, 55:241-273, 2004.
  - Hart, MA and Dearborn, DG, Diffuse Alveolar Hemorrhage (Pulmonary Hemosiderosis), in *Current Pediatric Therapy*, Vol 18, ed. F. Burg, J. Ingelfinger, R. Polin, and A. Gershon, W.B.Saunders Co. 18<sup>th</sup> Edition, 2006, p 455-457
  - Pestka, JJ, Yike, I, Dearborn, DG, Ward, MDW and Harkema, J, *Stachybotrys chartarum*, Trichothecene Mycotoxins and Damp Building-Related Illness: New Insights into the Public Health Enigma, *Toxicological Science* (in press).



RESUME- [REDACTED] RN

[REDACTED] OH 44060

**EDUCATION:**

1975 Diploma, Riverside High School, Painesville Twp, OH  
 1981 Licensed Practical Nurse, Willoughby-Eastlake School of Practical Nursing, Willoughby, OH  
 1987 Associate of Science in Nursing, RN, Lakeland Community College, Kirtland, OH  
 2004-2006 KSLearn information systems classes, CWRU  
 2004-2005 Information Systems program, Lakeland Community College, Kirtland, OH  
 2004-current Collaborative IRB Training Initiative (CITI) Course & CREC Certification, CWRU  
 April 2008 Asthma Educator Institute\*  
 \*preparing for certification exam

**LICENSURE:** Ohio Board of Nursing, Registered Nurse, date: 1987

**EMPLOYMENT EXPERIENCE:**

July 1997-current Pulmonary Hemosiderosis Prevention Program (PHPP), Rainbow Babies & Children's Hospital, Cleveland, OH, Supervisor- Dorr G. Dearborn, M.D., Ph.D.  
 May 2000- Nurse Program Coordinator, Cuyahoga County Urban Mold & Moisture Program (UMMP), Pediatric Pulmonology, Rainbow Babies & Children's Hospital, Cleveland, OH  
 6/98-4/00 Research Nurse, Pulmonary Hemosiderosis Prevention Program (PHPP), Pediatric Pulmonology, Case Western Reserve University, Cleveland, OH  
 7/97-6/98 Research Nurse, Pulmonary Hemosiderosis Prevention Program (PHPP), Case Western Reserve University, Cleveland, OH  
 9/81-9/06 Hospital Nursing, Cleveland Clinic Foundation, Cleveland, Ohio  
 1997-2006 Staff RN, Part time as needed, Medical-Surgical Nursing, Cleveland Clinic Foundation, Supervisor- Lilly Hicks, R.N.  
 1995-1996 Staff RN, Part time as needed, Unit-based, Hematology-Oncology Cleveland Clinic Foundation Supervisor, Lynette Paver, R.N.  
 1989-1995 Clinician II/Coordinator Pediatric Epilepsy/ Adult & Pediatric Drug Study Coordinator, Cleveland Clinic Foundation, Supervisor, Elaine Wyllie, M.D.  
 1989-1991 Staff RN, Epilepsy Monitoring Unit, Cleveland Clinic Foundation  
 1987-1989 Staff RN, Neurology/Neurosurgery, Cleveland Clinic Foundation  
 1984-1987 Licensed Practical Nurse, Neurology/Neurosurgery, Cleveland Clinic Foundation  
 1983-1984 Licensed Practical Nurse, Hospital Float Nurse, Medical/Surgical Division, Cleveland Clinic  
 1981-1983 Licensed Practical Nurse, Precautionary Care, Cleveland Clinic Foundation

**PRESENTATIONS & HEALTH FAIRS:**

2007 Health Fair, CCOAL Concerned Citizens Against Lead, July 19, 2007  
 2006 Lead Poisoning Rally, "March for Lead Safe Living"  
 2006 GCLAC Annual Lead Meeting, April 4, 2006  
 2003 Health Fair, PHPP, Louis Agassiz Elementary, May 9 2003  
 2002 Health Fair, PHPP, Healthy Family/Healthy Start, Sept 24 2002  
 2002 Health Fair, PHPP, Barbara H Booker Elementary, Jan 9, 2002  
 2001 Health Fair, PHPP & Cuyahoga County UMMP, Barbara H Booker Elementary, Apr 26, 2001  
 2000 Presentation, "Pulmonary Hemosiderosis Prevention Program & the Cuyahoga County Mold & Moisture Program", GRADS Programs, East High School, Dec 20, 2000  
 2000 Presentation, "Pulmonary Hemosiderosis Prevention Program", GRADS Program, East High School, March, 2000  
 1992 Co-investigator, "Temporal Lobe Epilepsy in Young Children", presented by primary investigator- Elaine Wyllie MD at the annual American Epilepsy Society Meeting, Seattle, WA, Dec 6 1992  
 1992 MM Pizzi, Kucera A, poster presentation, "Incidence of Oral Injury During Generalized Tonic-Clonic Seizures Without the Use of Tongue Blades", American Epilepsy Society Meeting, Seattle, WA, Dec 7 1992  
 1992 Family Education: Pre and Postop Surgery, "the Child Out Of Sync '92" seminar, Children's Neurology Center at St. Vincent Medical Center and the Neuro Developmental Center of Northwest Ohio,

- 1992 Lourdes College, Sylvania, OH Nov 5 1992  
Speaker, May 15<sup>th</sup> 1992 Symposium, "Seizure Disorders: Clinical Update for Nurse, Epilepsy Facts for Non- Medical Professionals", co-sponsors Cleveland State University, The Cleveland Clinic Foundation
- 1990-91 Presenter, Coordinator-Staff Inservices and Updates, Epilepsy Monitoring Unit, Cleveland Clinic Foundation
- 1990 Pizzi, M.M., Kucera, A., "Epilepsy Surgery-New Frontiers For Nursing", National Meeting of the American Association Of Neuroscience Nurses, Miami, FL
- 1990 Pizzi, M.M., Kucera, A., "Epilepsy Surgery-New Frontiers For Nursing", Meeting of the Neuroscience Nurses Group, Cleveland, OH

**PROFESSIONAL ACTIVITIES:**

- 2004 Participant, CCF Nursing QA project, Medical Abbreviations, Nursing Quality Management, Cleveland Clinic Foundation, Cleveland, OH, May 2004
- 2002 Attendee, University Hospitals, Management Series, August 2002
- 1992 Moderator, "Evolution in Care, Neuroscience Nursing in the 90's", presented by the Department of Neuroscience Nursing, Cleveland Clinic Foundation
- 1992 Co-ordinator, 1992 Symposium, Seizure Disorders: Clinical Update for Nurse, Epilepsy Facts for Non-Medical Professionals, co-sponsors Cleveland State University, The Cleveland Clinic Foundation, May 15<sup>th</sup> 1992
- 1990-91 Organizer-Staff Inservices and Updates, Epilepsy Monitoring Unit, Cleveland Clinic Foundation
- 1990 Instructor/Advisor-People Awareness Program, Cleveland Clinic Foundation

**PROFESSIONAL MEMBERSHIPS**

- 1992-95 Associate membership, American Epilepsy Society
- 1990-95 Member, American Association of Neuroscience Nurses
- 1989-95 Member, Neurology Nurses Group, Cleveland Chapter
- 1991-94 Member, Epilepsy Foundation Of America
- 1991-92 Associate Membership, Ohio Coalition of Nurses with Specialty Certification

RESUME

**Professional Employment History**

**Environmental Health Watch – Executive Director**, 1993 to present; **Research Director**, 1984 to 1993. EHW is an information, research, assistance and advocacy organization focusing on the environmental health issues of the urban and industrial environment of Northeast Ohio, including the indoor environment, outdoor air pollution and chemical accident prevention.

**Current and Recent Projects:**

- *Healthy Affordable Green Housing Center*: A new Center established by EHW for research, education, training, consultation, policy development and advocacy, focusing on home renovation and maintenance in low-income housing, to lessen utility costs, reduce environmental impact, and improve health.
- *Case Healthy Homes & Patients Project*: HUD Healthy House Demonstration Project, with Case School of Medicine, to assess and preventively remediate health hazards in the homes of pregnant women and to train family medicine residents on home hazards assessment.
- *City-County Healthy House Initiative*: HUD Health House Demonstration Project, with the Cuyahoga County and Cleveland Health Departments, to integrate weatherization and health hazard remediation interventions.
- *Cockroach Control and Allergen Reduction*: HUD Health House Technical Studies grant to investigate integrated pest management, specialized cleaning methods and cockroach allergen assessment procedures in public housing.
- *Mold & Moisture Project*: with the Cuyahoga County Board of Health and Case Medical School, to assess and control of home health hazards related to asthma and other children's respiratory diseases.
- *Follow-up Evaluation of Soil-Lead Remediation*: HUD Health House Technical Studies project with the University of Cincinnati, to assess the effectiveness of soil-lead control treatments.
- *Reducing Children's Exposure to Pesticides and Asthma Triggers*: educate parents, building managers, tenant organizers and child care providers on safer and more effective methods of controlling pests that are the sources of asthma triggers—cockroaches, rodents and dust mites.
- *Tenants for Healthy Housing*: trained Cleveland Tenant Organization members to conduct inspections for home health hazards.
- *Lead-Safe Cuyahoga*: with the County Department of Development to educate families on safe methods of lead hazard control.
- *Improving Chemical Facility Safety and Security*: through the Cuyahoga County Local Emergency Planning Committee, working with industry, environmental agencies and emergency responders to prevent major chemical releases by hazard reduction and inherently safer processes.

**Cleveland Lead Hazard Abatement Center – Co-Director**, 1992 to 1995. CLHAC was a joint project of EHW and the Cleveland Department of Public Health which: 1) trained welfare recipients as lead abatement specialists, 2) conducted lead hazard control work in the homes of low-income, lead-poisoned children, 3) researched abatement effectiveness, and 4) helped develop the infrastructure to support safe and cost-effective lead hazard reduction.

**Industrial States Policy Center – Research Associate**, 1982 to 1985. ISPC, now Citizens Policy Center, is the public policy research arm of Ohio Citizen Action.

**Ohio Public Interest Campaign – Financial Director**, 1979 to 1985. OPIC, now Ohio Citizen Action, is Ohio's largest consumer and environmental advocacy organization.

**Panta Rhei – Co-founder and first Executive Director**, 1971 to 1978. Panta Rhei, now Spectrum of Supportive Services, is a rehabilitation agency that operates group residences and work programs for former long-term psychiatric patients.

**Cleveland State Hospital, Research Department – Research Associate**, 1970 to 1971.

**Education**

**Western Reserve University**, B.A., cum laude, Psychology and Sociology, 1966.

**Case Institute of Technology**, Department of Organization and Administration, M.S., Organizational Behavior, 1970.

**Licenses and Certificates**

**Ohio Department of Health**, 1995: Licensed Lead Abatement Contractor and Licensed Lead Risk Assessor.

**Cuyahoga Community College**, 1995: Lead Inspector and Lead Risk Assessor Certificates.

**University of Cincinnati**, Institute of Environmental Health, 1991 and 1992: Lead Hazard Abatement Supervisor Certificate; Lead Hazard Abatement Specialist Certificate.

**University of Cincinnati**, Institute of Environmental Health, 1987: Asbestos Hazard Abatement Specialist Certificate.

**Boards and Professional Affiliations** (selected)

- American Public Health Association
- Cleveland Department of Public Health – Advisory Committee (2002-04)
- Cuyahoga County Local Emergency Planning Committee – Vice Chair
- EcoCity Cleveland – Board (1994-2004)
- Greater Cleveland Asthma Coalition – Steering Committee
- Greater Cleveland Lead Advisory Council – Steering Committee
- Swetland Center for Environmental Health, Case School of Medicine – Advisory Committee
- Help End Lead Poisoning (HELP) Coalition – Board (1998-2003)
- National Center for Healthy Housing (formerly National Center for Lead-Safe Housing) – Board (2000-2002)
- Ohio Citizen Action – Board (1985-2002)

**Awards** (selected)

- Social Justice Activism Award (2006), awarded by the May Dugan Neighborhood Center
- Howard Metzenbaum Citizen Action Award (2005), awarded by Ohio Citizen Action
- Social Justice Member of the Year Award (2004), awarded by Greater Cleveland Community Shares
- Professional Excellence Award (2002), awarded by the Childhood Lead Poisoning Prevention Program, Ohio Department of Health

**Contact Information**

Environmental Health Watch, [REDACTED] OH 44113  
[REDACTED], fax/[REDACTED], e-mail [REDACTED]

██████████ M.D., CMD, is an Associate Professor of Family Medicine at the Case School of Medicine. As the Director for the Center for Geriatric Medicine at University Hospitals Case Medical Center he is responsible for overseeing the delivery of clinical services, education and training, and research as it pertains to elder care. The clinical programming of the Center includes an active House Calls Program, Transitional Care, outpatient comprehensive care and Geriatric Comprehensive Assessment, and long term care in local extended care facilities. The Center is responsible for training Case medical students in senior care at University Hospitals. Dr. ██████████ is board-certified in Family Medicine, Geriatric Medicine, and Hospice/Palliative Medicine. He is a Faculty Associate of the Case Western Reserve University Center on Aging and Health, and serves as the Medical Director for the Case University Hospitals House Calls Program.

#### Education:

INSTITUTION AND LOCATION	DEGREE	YEAR	FIELD OF STUDY
University of Chicago, Chicago, IL	BA	1986	Biology
Rush Medical College, Chicago, IL	MD	1990	Medicine
MetroHealth Medical Center (CWRU), Cleveland, OH	Fellowship	1996	Geriatric Medicine
MetroHealth Medical Center (CWRU), Cleveland, OH	Residency	1994	Family Medicine
University Hospitals (CWRU)	Internship	1991	Family Medicine

#### Professional Experience

##### Case School of Medicine Faculty Positions:

2005 - Present	Associate Professor, Department of Family Medicine, Case
2003 - Present	Faculty Associate, Center on Aging and Health, Case Western Reserve University, Cleveland, Ohio
1999-2005	Assistant Professor, Department of Family Medicine, Case
1997-1999	Senior Instructor, Department of Family Medicine, Case
1979-1982	Instructor, Department of Family Medicine, Case

##### Administrative Positions:

2008 – Present	Medical Director, Hospice Services of Southwest General, Southwest General Health Center, Strongsville, Ohio
2007 – Present	Director, Center for Geriatric Medicine, University Hospitals Case Medical Center, Cleveland, OH.
2007 - Present	Medical Director, House Calls Program, University Hospitals Case Medical Center, Cleveland, OH.
2005 – Present	Assistant Medical Director, Hospice and Palliative Care Partners of Ohio
2005– Present	Medical Director, Eliza Bryant Village, Cleveland, OH.
2003-2007	Medical Director, Skilled Services, Franklin Plaza Extended Care, Cleveland.
1999-2007	Medical Director, Long Term Care Services, The MetroHealth System, Cleveland, OH.
2002-2005	Medical Director, Cleveland area, EverCare, United HealthGroup, Minneapolis, MN
1999-2005	Medical Director, MetroHealth Center for Skilled Nursing Care – East, Highland Heights, OH
1997-2005	Medical Director, The Elisabeth Severance Prentiss Center for Skilled Nursing Care at MetroHealth, Cleveland.
1999-2004	Medical Director, Villa Sancta Anna Home for the Aged, Inc, Beachwood, OH.
1996-1998	Associate Residency Director at MetroHealth Clement Center,

Department of Family Practice, Metro Family Practice Residency Program, Cleveland, Ohio

### Education Leadership

2007 – Present Member, Clinical Curriculum Committee, Case SOM, CWRU  
2007 – Present Member, Joint Committee on Oversight Group, Case SOM, CWRU  
2007 – Present Member, Advance Core Education Committee, Case SOM, CWRU  
2007 – Present Convener, Advance Core on Aging Education Subcommittee, Case SOM, CWRU

### Honors / Awards

2007 Distinguished Faculty Award, Department of Family Medicine, Case SOM, CWRU, Cleveland, Ohio  
2007 Family Medicine Mentorship Award, Department of Family Medicine, Case SOM, CWRU, Cleveland, Ohio  
2006-2007 Faculty Scholar, Scholarship Collaboration in Teaching and Learning, Case SOM, CWRU, Cleveland, Ohio  
2005-2007 President, Ohio Medical Directors Association  
1993-1994 Chief Resident, Metro Family Practice Residency Program, Cleveland, Ohio  
1990 Alpha Omega Alpha, Medical Honors Society, Rush Medical College, Chicago

### Board Certification

1994 American Board of Family Practice, Recertified in 2000, 2007  
1998 American Board of Family Practice and the American Board of Internal Medicine, Certificate in Added Qualifications in Geriatric Medicine  
2003 American Board of Hospice and Palliative Medicine, Diplomate

#### ADDITIONAL SPECIALTY CERTIFICATION

1999, 2005 American Medical Directors Association, Certified Medical Director in Long-Term Care (CMD)

### Professional Memberships

2000-Present American Academy of Hospice and Palliative Care  
1998- Present American Medical Directors Association  
1996-Present American Geriatric Society  
1994-Present American Academy of Family Physicians  
1990-Present Alpha Omega Alpha, Medical Honors Society

### Selected Publications:

\*DeGolia P. *"An Alternative View of Health Promotion and Disease Prevention in ElderCare,"*

Chapter in Health Promotion and Disease Prevention. Stability Pact for South Eastern Europe Public Health Cooperation. Donev D, Pavlekov G, Ungurean C, editors. Hans Jacobs Publishing Company, 2007. In print.

\*Fallon, W, Rader, E, Zyzanski, S, Mancuso, C, Martin, B, Breedlove, L, DeGolia, P, Allen, K, Campbell, J.; *"Geriatric trauma outcomes are improved by a geriatric trauma consultation service."* Journal of Trauma 2006, 61(5):1040-1046.

\*Campbell, J, Fallon, W, Peerless, J, Rader, E, DeGolia, P. ABSTRACT *"Satisfying the mandate: Lessons learned in the process of geriatric education to subspecialists."* Journal of the American Geriatrics Society 2006, 54(4):S82

\*DeGolia, P and Eckenfels, E. *"The Case of Edlercare"*, chapter in Health Determinants in the

Scope of New Public Health. Stability Pact for South Eastern Europe Public Health Cooperation. Georgieva L, Burazeri G, editors. Hans Jacobs Publishing Company, 2005: 604-14. Available from : [w2ww.snz.hr/ph-see](http://www.snz.hr/ph-see)<<http://www.snz.hr/ph-see>>

\*Campbell J., DeGolia P., Como J., Peerless J., Rader E., & Fallon W. ABSTRACT *"Factors associated with geriatric trauma."* Journal of the American Geriatrics Society 2005, 53(4):S206.

\*Mion L, Fick D, Sandhu S, DeGolia P, Campbell J. *"Potentially inappropriate medications: Prevalence in EDs and skilled nursing facilities."* Gerontologist 2005; 45(Special Issue II):440. \*DeGolia P. *"Multigenerational Issues that Impact on Successful Aging in Seniors. Caregiving- a precious gift."* Chapter in Successful Aging Through the Life Span. Springer Publishing. 2003.

**[REDACTED], PhD, MPH** is Assistant Professor, Department of Epidemiology and Biostatistics. In addition, she has a secondary appointment with the Mandel School of Applied Social Sciences. Dr. **[REDACTED]** training and research focuses on the impact of environmental factors on human health, with an emphasis on reproductive and perinatal outcomes. In addition to her other research; she has led an evaluation project of a primary lead prevention project in collaboration with the Cleveland Department of Public Health and Cuyahoga County Board of Health. After minor home repairs and lead education to prevent lead exposure, families with newborn infants are followed prospectively for 12 months to determine the effectiveness of the program in preventing lead poisoning in infants. Dr. **[REDACTED]** has extensive experience in the design, implementation, and analysis of epidemiologic studies.

INSTITUTION AND LOCATION	DEGREE	YEAR(s)	FIELD OF STUDY
Tufts University	BA	1986	Anthropology
Tulane University	MPH	1995	Epidemiology
Johns Hopkins University	PhD	2003	Env./Occ. Epidemiology
NICHD, National Institutes of Health	Post-Doctoral Fellow	2003-2005	Reproductive Epidemiology

## RESEARCH AND PROFESSIONAL EXPERIENCE

1994	Research Assistant, Department of Environmental Health Sciences, Tulane University School of Public Health and Tropical Medicine, New Orleans, LA.
1994	ASPH/CDC/ATSDR Summer Intern, National Institute for Occupational Safety and Health, Cincinnati, OH.
1994-1995	Intern, Section of Environmental Epidemiology, Louisiana Office of Public Health, New Orleans, LA.
1996-1998	Research Assistant, Department of Epidemiology, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD.
1998-2002	Study Coordinator, Environmental Epidemiology Service, Department of Veterans Affairs, Washington, DC.
2001-2003	Research Assistant, Department of Epidemiology, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD.
2003-2005	Post-Doctoral Fellow, Division of Epidemiology, Statistics and Prevention Research, National Institute of Child Health and Human Development, National Institutes of Health, Rockville, MD.
2005-present	Assistant Professor, Department of Epidemiology and Biostatistics, School of Medicine, Case Western Reserve University, Cleveland, OH.
2008-present	Assistant Professor, Mandel School of Applied Social Science, Western Reserve University, Cleveland, OH.

## HONORS AND AWARDS

2007	Certificate of Appreciation, Cuyahoga County Board of Commissioners, Ohio
2007	Selected speaker, New Faculty Symposium, Case Western Reserve University
2003	Jean Coombs Fund
2002	Charlotte Ferencz Fellowship for Birth Defects Research
2002	Summer Epidemiology Fund
1998	Marilyn Menkes Book Award
1997-1998	Epidemiology Student Organization, President
1997	Charlotte Silverman Award for Epidemiology and Policy

## PUBLICATIONS



1. [REDACTED], Lee NL, Samet JM. Frequency of policy recommendations in epidemiology publications. *Am J Public Health*, 89(8): 1206-11, 1999.
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4. Kang H, Magee C, Mahan C, Lee K, Murphy F, [REDACTED], Matanoski G. Pregnancy outcomes among U.S. Gulf War veterans: a population-based survey of 30,000 veterans. *Ann Epidemiol*, 11(7): 504-11, 2001.
5. [REDACTED], Correa-Villaseñor A, Lees PSJ, Dominici F, Stewart PA, Breyse PN, Matanoski G. Parental lead exposure and total anomalous pulmonary venous return. *Birth Defects Res Part A Clin Mol Teratol*, 70:185-193, 2004.
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9. Eisen SA, Karlinsky J, [REDACTED], Blanchard MS, Kang HK, Murphy FM, Alpern R, Reda DJ, Toomey R, Battistone MJ, Parks BJ, Klimas N, Pak HS, Hunter J, Lyons MJ, Henderson WG, and Gulf War Study Participating Investigators. Spouses of Gulf War 1 Veterans: Medical Evaluation of a Population Based Cohort. *Mil Med*, 171(7):613-618, 2006.
10. Lynch CD, [REDACTED], Louis GMB. Estimation of the day-specific probabilities of conception: current state of the knowledge and the relevance to epidemiologic research. *Paediatr Perinat Epidemiol*, 20 Suppl 1: 3-12, 2006.
11. Correa-Villaseñor A, Min YI, Stewart PA, Lees PSJ, Breysee P, [REDACTED]. Inter-rater agreement of assessed prenatal maternal occupational exposures to lead. *Birth Defects Res Part A Clin Mol Teratol*, 76(11): 811-24, 2006.

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13. [REDACTED], Zullo MD, Goldberg JM. The association between heavy metals, endometriosis, and uterine myomas among premenopausal women, NHANES 1999-2002. *Hum Reprod.* 23(3):679-687, 2008.



1. Provide as much data as is available for your target area based on 2000 Census. If data are from other sources, such as for blood data, cite the sources.

OMB Control No. 2539-0015 This information is designed to provide timely information to HUD regarding the progress of grantees in carrying out lead hazard control and healthy homes grant programs and provide the Congress with status reports as required by Title X of the Housing and Community Development Act of 1992 (PL 102-550) and/or the Housing and Urban Development Act of 1970.

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